

US009409975B2

# (12) United States Patent

Hostetter et al.

# (10) Patent No.: US 9,409,975 B2 (45) Date of Patent: Aug. 9, 2016

# (54) ANTIBODY BINDING MICROBIAL HEPARIN BINDING MOTIF TO RETARD OR PREVENT MICROBIAL BIOFILM FORMATION ON IMPLANTED MEDICAL DEVICES

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(\*) Notice: Subject to any disclaimer, the term of this patent is extended or adjusted under 35 U.S.C. 154(b) by 0 days.

(21) Appl. No.: 14/518,051

(22) Filed: Oct. 20, 2014

#### (65) **Prior Publication Data**

US 2015/0050284 A1 Feb. 19, 2015

# Related U.S. Application Data

- (63) Continuation-in-part of application No. PCT/US2013/031499, filed on Mar. 14, 2013.
- (60) Provisional application No. 61/636,243, filed on Apr. 20, 2012.

(51)	Int. Cl.	
	A61K 31/00	(2006.01)
	A61K 39/395	(2006.01)
	C07K 16/00	(2006.01)
	C07K 16/14	(2006.01)
	C07K 16/12	(2006.01)
	C07K 7/08	(2006.01)
	A61K 39/00	(2006.01)

(52) U.S. Cl.

CPC . **C07K 16/14** (2013.01); **C07K 7/08** (2013.01); **C07K 16/1271** (2013.01); **A61K 39/00** (2013.01); **A61K 2039/505** (2013.01); **A61K** 2039/575 (2013.01); **C07K 2317/34** (2013.01); **C07K 2317/76** (2013.01)

# (58) Field of Classification Search

None

See application file for complete search history.

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#### (57) ABSTRACT

Methods and reagents for ameliorating biofilm formation on a surface of an indwelling or implanted device in a patient resulting in decreased virulence of microorganisms such as *Candida* species and/or *Staphylococcus* species.

## 8 Claims, 21 Drawing Sheets

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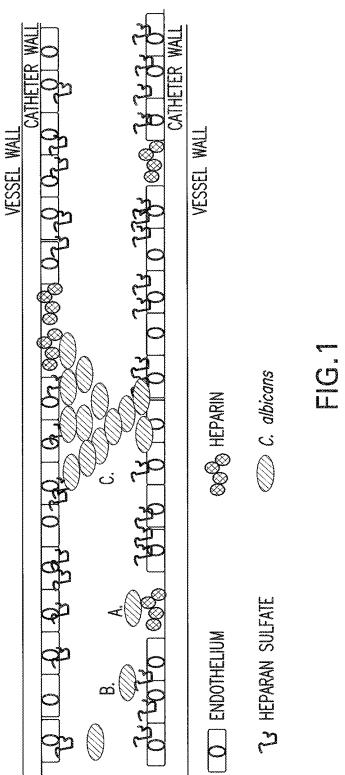
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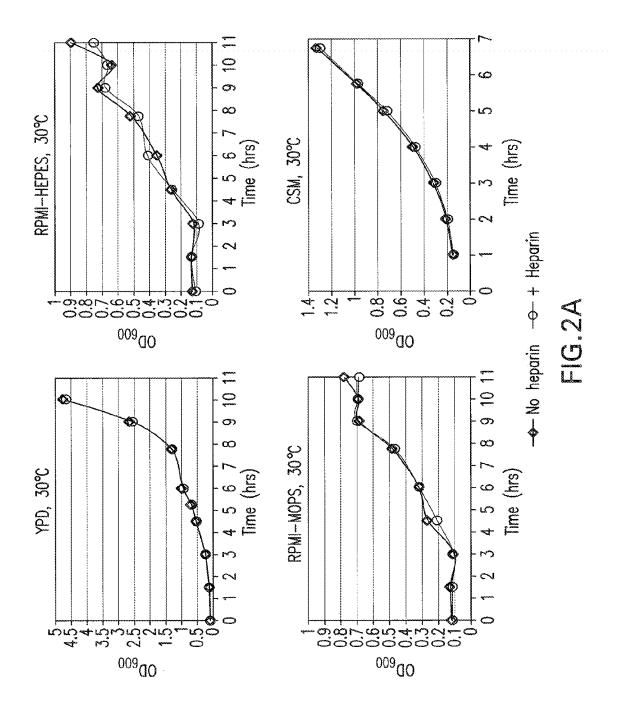
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Doubling Times (hours) at 30°C						
	No Heparin	+ Heparin				
YPD	1.70	1.69				
RPMI-HEPES	3.56	3.75				
RPMI-MOPS	3.58	3.51				
CSM	1.82	1.79				

FIG.2B

Percent Hyphae						
	No Heparin	+ Heparin				
YPD, 30 °C, 2.5 hours	0.13	0.09				
RPMI-HEPES, 37 °C, 1 hour	7.37	5.01				

FIG.2C

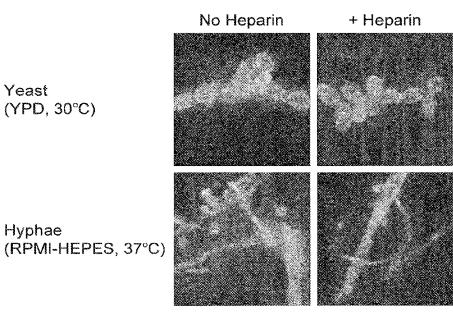


FIG.2D

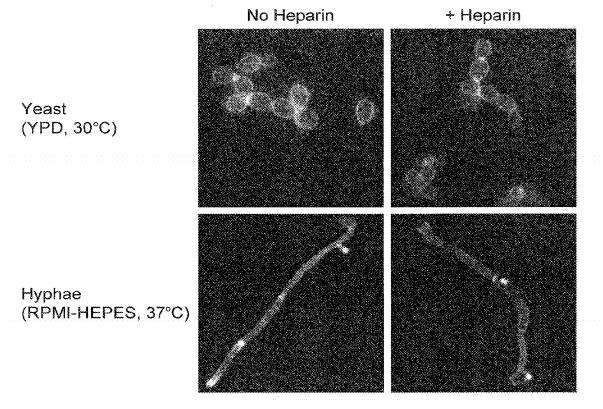


FIG.2E

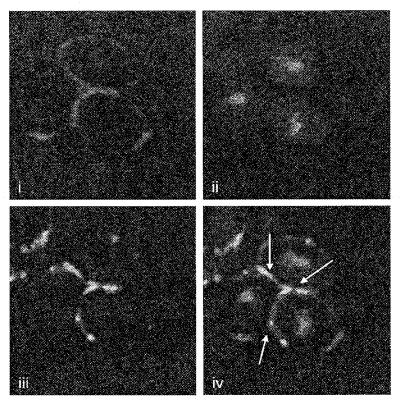
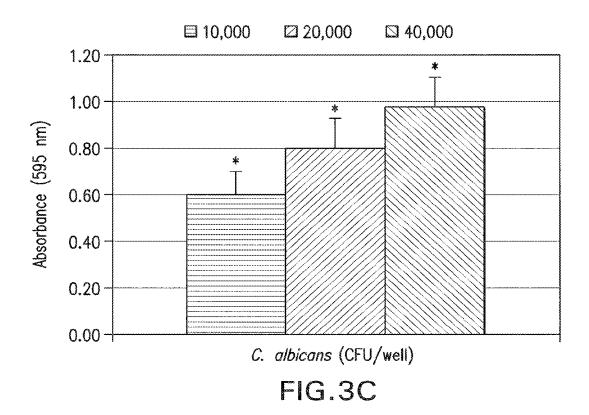
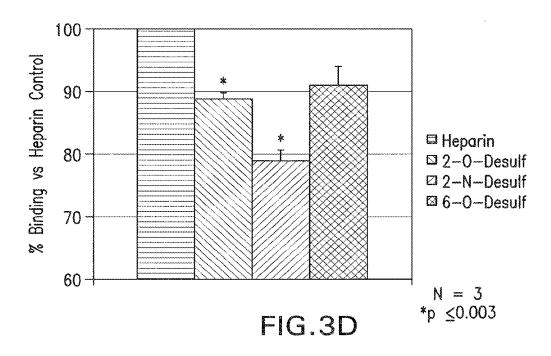


FIG.3A

Optical Density <sub>595</sub> at 10,000 CFU/well <i>C. albicans</i>									
Heparin units/well (μg/well)	1.25 (6.3)	2.5 (12.5)	5.0 (25.0)	10.0 (50.0)	20.0 (100.0)				
Mean OD <sub>595</sub> (+/- SD)	0.53 (+/- 0.05)	0.51 (+/- 0.03)	0.48 (+/~ 0.04)	0.51 (+/- 0.02)	0.49 (+/- 0.03)				

FIG.3B

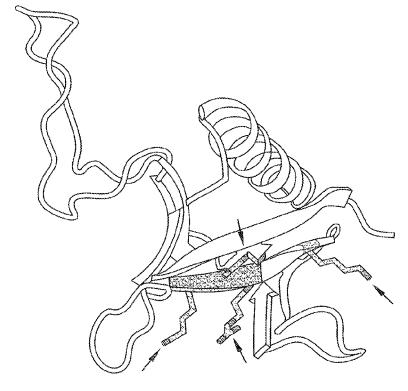




Motif 1	Motif 2	Motif 3	Motif 4	Motif 5
804 QKKHQIHK	1383 THKGRF	<sub>1530</sub> MKRGKP	<sub>1593</sub> FKKRFFKL	1612 SHKTRA



FIG.4A



1593 FKKRFFKL (Motif 4)

FIG.4B

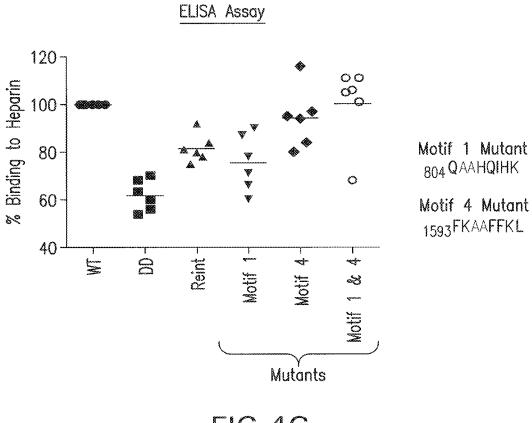


FIG.4C

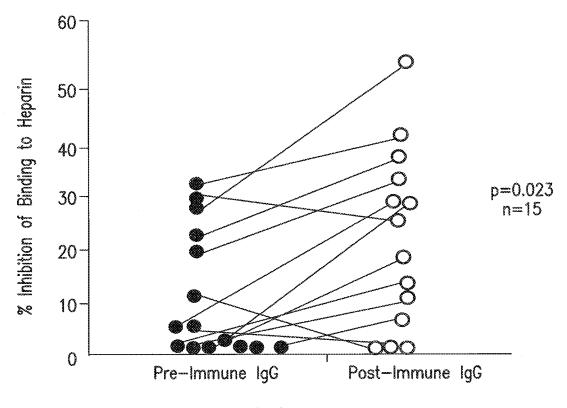
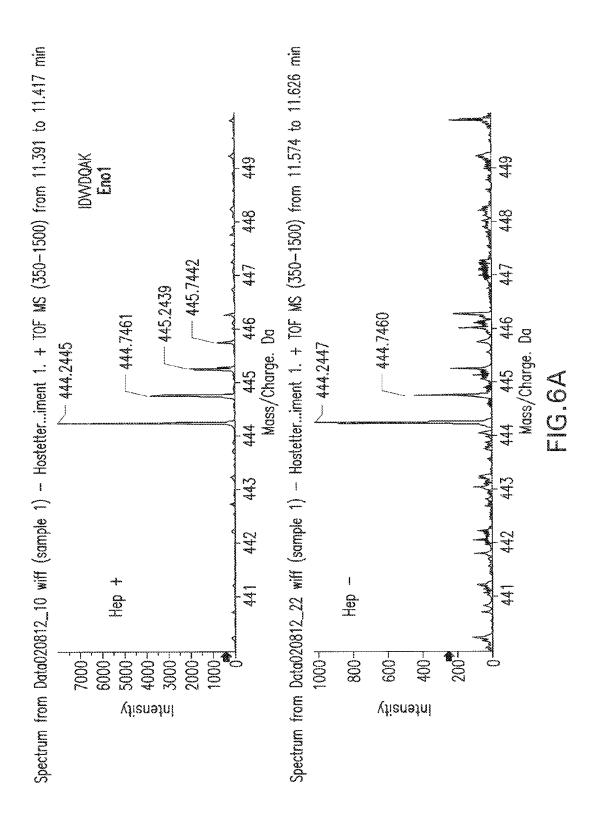
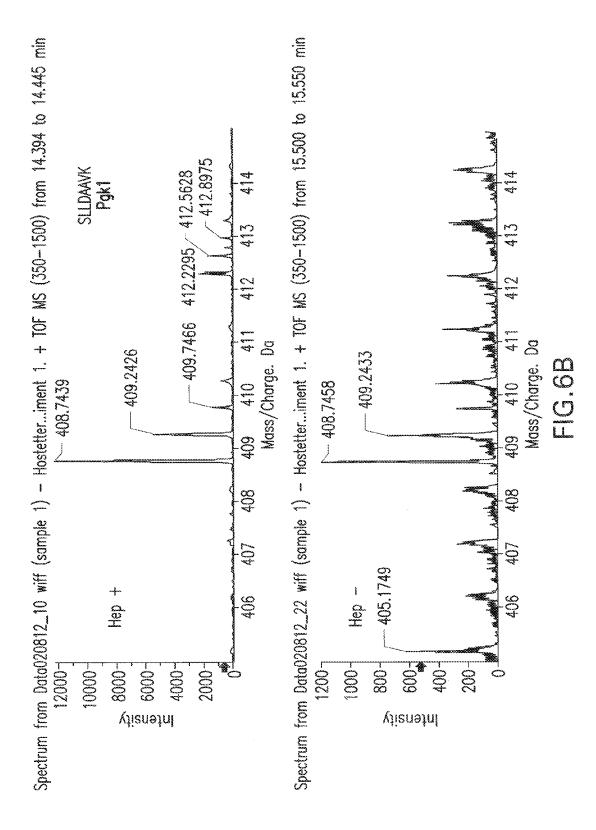
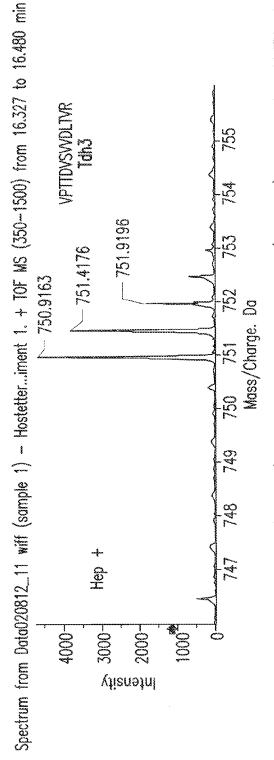


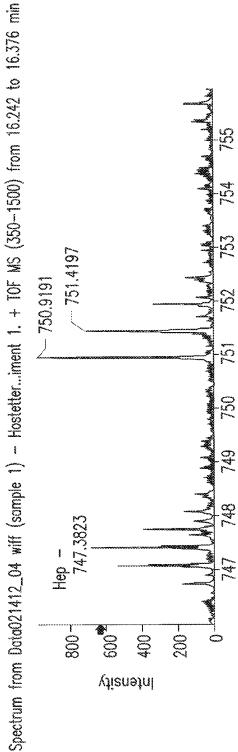
FIG.5

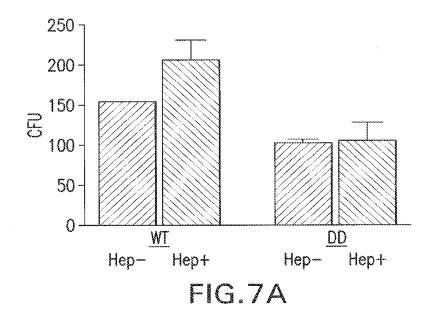


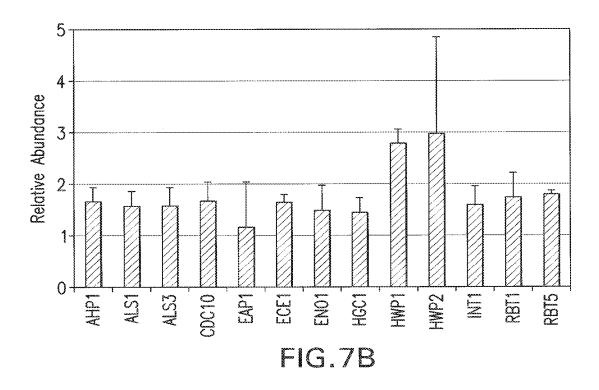


Mass/Charge. Da











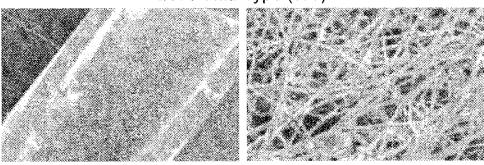


FIG.8A

INT1 Double Disruptant (DD)

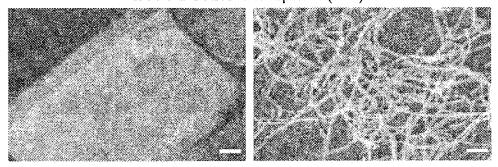


FIG.8B

INT1 Reintegrant (Reint)

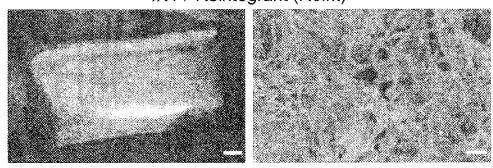
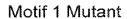


FIG.8C



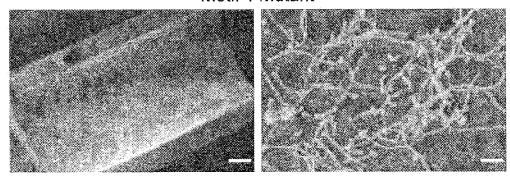


FIG.8D

Motif 4 Mutant

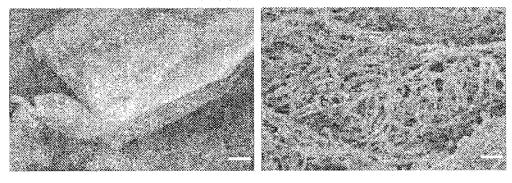


FIG.8E

Motif 1 & 4 Mutant

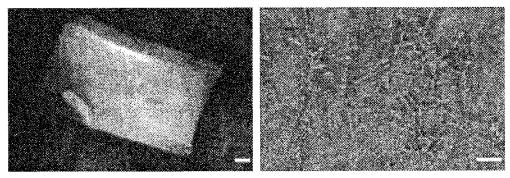
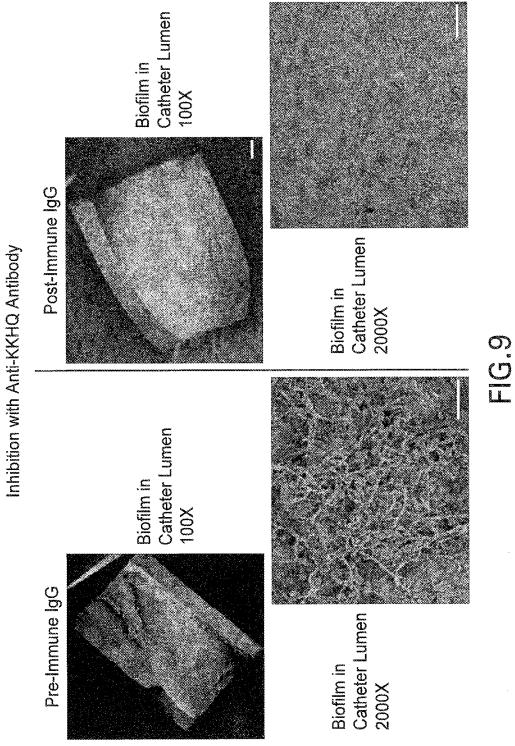
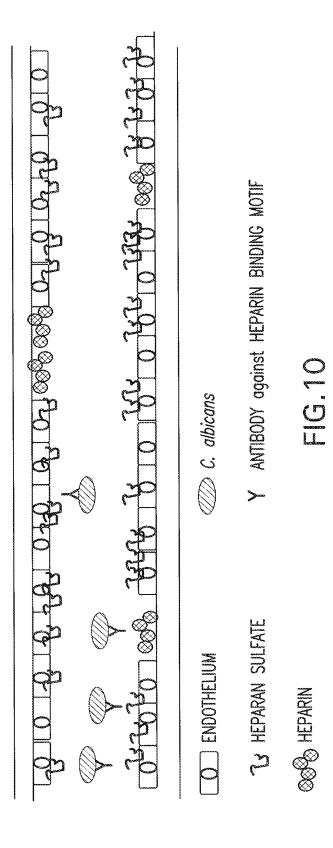


FIG.8F





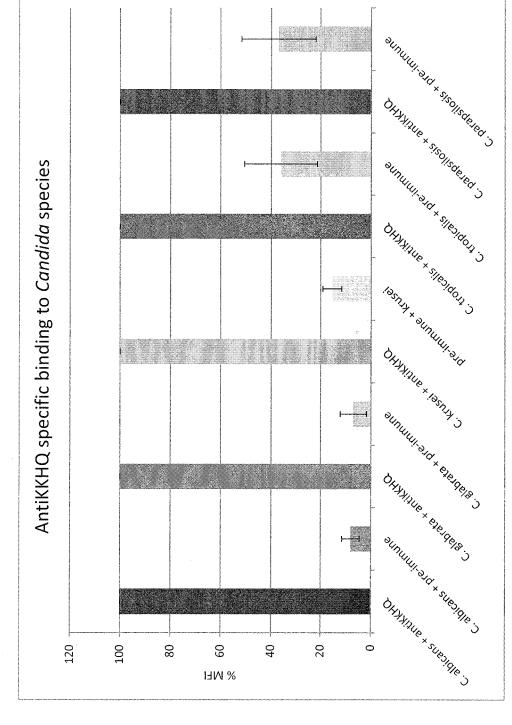
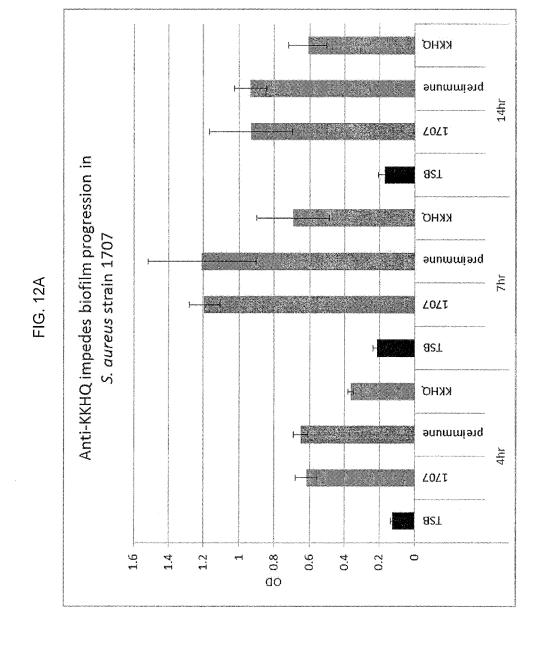
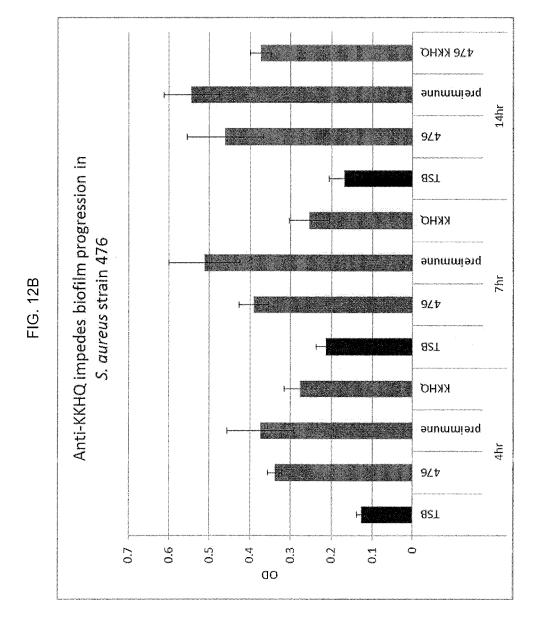


FIG. 11





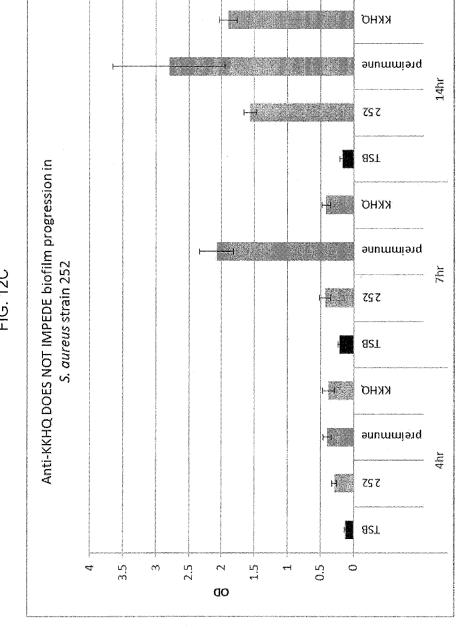


FIG. 12C

# ANTIBODY BINDING MICROBIAL HEPARIN BINDING MOTIF TO RETARD OR PREVENT MICROBIAL BIOFILM FORMATION ON IMPLANTED MEDICAL DEVICES

This application is a Continuation-In-Part of co-pending PCT/US2013/031499 filed Mar. 14, 2013, which claims priority to U.S. application Ser. No. 61/636,243 filed Apr. 20, 2012, each of which is expressly incorporated by reference herein in its entirety.

A novel interaction between Candida albicans (C. albicans) surface proteins and heparin, a drug commonly used in patients at risk for catheter-associated biofilms and candidemia, is disclosed with an antibody that reduced or prevented a microorganism surface protein from binding to hep- 15 arin, and reduced catheter-associated biofilm formation, where the reduction in biofilm formation can reduce the microorganism's virulence in a patient, with reduction encompassing any level of decrease.

Heparin is a highly sulfated, non-branched, anionic disac- 20 charide composed of uronic acid, predominantly iduronic acid, in 1,4 linkage with glucosamine. Heparin is a known anticoagulant that is often infused in indwelling catheters to prevent the blood flowing through the catheter from clotting. Heparan sulfate is composed of the same disaccharide but is 25 amino acids in prescribed patterns. less sulfated and has a more varied structure than heparin. Heparan sulfate linked to core proteins, such as syndecans or glypicans, forms heparan sulfate proteoglycans (HSPGs). HSPGs are widely expressed on mammalian cell surfaces and in the extracellular matrix. Heparin binding motifs can bind to 30 indwelling catheter. both heparin and heparan sulfate.

Several microbial proteins bind heparin and heparan sulfate, e.g., HIV-1 gp120, CypA, and Tat; hepatitis C envelope glycoprotein E2; herpes simplex virus glycoproteins B, C, and D; dengue virus envelope protein; Plasmodium falci- 35 and heparin analogs in vitro. parum circumsporozoite (CS) protein, Listeria monocytogenes ActA, and LcI of Legionella pneumophila (1-11). Such microbial protein interactions with surface HSPGs typically promote binding and entry of the microbial organism into the mammalian cell (except for HIV-1 gp120 and Tat), but the 40 mechanisms by which individual microbial proteins recognize heparin or heparan sulfates are largely undefined. Positively charged tripeptides containing Lys or Arg in the amino terminus of L. monocytogenes ActA (aa 40-230) and in L. pneumophila LcI (aa 69-349) were shared with tripeptides in 45 a number of heparin-binding mammalian proteins such as EGF-like growth factor and vonWillebrand factor, but the precise amino acids that mediated binding to heparin were not defined for ActA or LcI (10-11).

Eukaryotic proteins that bind heparin express either linear 50 or conformational heparin binding motifs (HBM). Linear heparin binding motifs are short, conserved peptides containing both basic (B) and hydropathic (X) amino acids in specific patterns first identified by Cardin (XBBXBX) and Weintraub (XBBBXXBX) and subsequently expanded by Sobel 55 (XBBBXXBBBXXBBX) (12-14). Molecular modeling studies suggested that basic amino acids such as lysine, arginine, and histidine were critical for interaction with anionic sulfate or carboxylate groups in heparin through electrostatic and hydrogen bonds. For example, substituting alanine for 60 basic amino acids in linear HBM in the morphogen sonic hedgehog abolished binding to heparin (15). However, because many heparin-binding proteins failed to exhibit linear motifs, the concept of spatial orientation of basic residues was propounded (16). The CPC clip motif, a structural sig- 65 nature in which two cationic residues surround one polar residue, was conserved in eukaryotic heparin binding pro2

teins, as well as in vaccinia complement protein and papillomavirus 18 capsid protein (17)

Because of its propensity to form biofilms in implanted medical devices such as indwelling central venous catheters, Candida albicans (C. albicans) is a leading pathogen in infections of indwelling catheters. A biofilm is a multilayered structure of microbes embedded in a polysaccharide matrix that forms on central venous catheters as well as implanted prosthetic joints, contact lenses, and other such medical devices (18, 19). A biofilm is undesirable because antibiotics and host defenses cannot penetrate it, thus a biofilm prevents elimination of microorganisms that have attached or adhered to a surface of an implanted medical device. For example, because of the high flow-through in a central venous catheter, sessile projections from a biofilm break off and are carried into the bloodstream to cause infection that can be carried by the blood to other sites in the body.

Heparin is a known anticoagulant, and catheters are often infused with heparin to prevent blood flowing through the catheter from clotting (20). Because heparin inhibited attachment of C. albicans to extracellular matrix proteins (21), the inventors hypothesized that C. albicans interacted with heparin through linear heparin binding motifs (HBMs): conserved sequences of basic (Arg, Lys, H is) and hydropathic

### BRIEF DESCRIPTION OF THE DRAWINGS

FIG. 1 schematically illustrates the internal lumen of an

FIGS. 2A-E demonstrate lack of an effect by heparin on wild type Candida albicans (C. albicans) planktonic growth and morphology.

FIGS. 3A-D demonstrate C. albicans binding to heparin

FIGS. 4A-C show that two lysine residues in linear heparin binding Motif 1 in C. albicans Int1 mediate binding to heparin, as measured by an ELISA assay in vitro. FIG. 4A discloses SEQ ID NOS 1, 40, 48, 2, 3, 52 and 53, respectively, in order of appearance. FIG. 4B discloses SEQ ID NO: 2. FIG. 4C discloses SEQ ID NOS 52-53, respectively, in order of appearance.

FIG. 5 compares pre-immune rabbit IgG with affinitypurified IgG raised against the sequence HKQEKQKKHQI-HKV (SEQ ID NO:4) for ability to inhibit binding of C. albicans to heparin.

FIGS. 6A-C show consequences of heparin binding in vitro. FIG. 6A discloses SEQ ID NO: 65. FIG. 6B discloses SEQ ID NO: 66. FIG. 6C discloses SEQ ID NO: 67.

FIGS. 7A-B show consequences of heparin binding in vitro.

FIGS. 8A-F demonstrate that heparin binding motifs contribute to biofilm formation in vivo.

FIG. 9 demonstrates that affinity-purified IgG raised against the sequence HKQEKQKKHQIHKV (SEQ ID NO:4) substantially inhibited biofilm production in jugular venous catheters in rats. FIG. 9 discloses SEQ ID NO: 6.

FIG. 10 schematically illustrates the internal lumen of an indwelling catheter in the presence of antibody against heparin binding motifs on cell wall proteins of C. albicans.

FIG. 11 shows Anti-KKHQ specific binding to Candida species.

FIGS. 12A-C show Anti-KKHQ effect on biofilm progression.

Thirty-four C. albicans surface proteins encoding at least one linear heparin binding motif (HBM) were identified from a sequence-based search. Twelve of these 34 proteins flanked

recently described transcriptionally active regions that are involved in biofilm production. Thirty-three of these 34 proteins are known targets of master biofilm regulators (22).

C. albicans binding to 2.5 units (12.5 μg) solid-phase heparin in an ELISA assay was significantly decreased by desulfation of heparin at the 2-O or 2-N groups, and by preincubation of C. albicans with heparin. The protein Int1 contained the largest number of HBMs; Int1 is a surface protein that is involved in adhesion, filamentation, and antigenic recognition. In the Int1 sequence 804QKKHQIHK (SEQ ID NO: 1), 10 alanine mutation of lysine residues at positions 805/806 significantly reduced binding of the Int1 mutant to heparin. Rabbit IgG recognizing the polypeptide 799HKQEKQKKHQIHKV<sub>812</sub> (SEQ ID NO: 4) inhibited C. albicans binding to heparin by 19%; pre-immune rabbit IgG had no effect.

Consequences of heparin binding in vitro included removal of C. albicans surface antigens such as Eno1, Pgk1, Tdh3, and Ssa1/2, which themselves contain putative HBMs; impairment of histatin-mediated killing; and modulation of gene expression. In vivo, substitution of alanine residues for 20 lysines at positions 805/806 in <sub>804</sub>QKKHQIHK (SEQ ID NO: 1) markedly attenuated biofilm formation in central venous catheters in rats. In addition, pre-incubation of C. albicans IgG polypeptide rabbit recognizing the <sub>799</sub>HKQEKQKKHQIHKV<sub>812</sub> (SEQ ID NO: 4) inhibited bio- 25 film formation in vivo; pre-immune IgG had no inhibitory effect. These results identify linear HBM in C. albicans surface proteins, characterize specific lysine residues that mediate heparin binding, and demonstrate relevance for innate and adaptive immunity in vitro and biofilm formation in vivo.

The inventive method and composition ameliorated this undesirable situation by using antibodies against a specific heparin-binding motif that is expressed by surface proteins on *C. albicans*; other microorganisms also express similar heparin binding motifs. Without being held to a single theory, the 35 disclosed antibodies reduce or prevent the undesirable biofilm from forming on the surface of a medical device, particularly a plastic device, implanted in a patient. Microorganisms include bacteria, yeast, fungi, etc. as known to one skilled in the art. Medical devices include those implanted or 40 implantable in a patient, particularly plastic medical devices, including but not limited to catheters and central lines but excluding current non-plastic implanted joints, pacemakers, pacemaker wires, and spinal rods.

In one embodiment of the inventive method, antibodies 45 were produced against a linear heparin binding motif that was expressed by a surface protein of *Candida albicans* (*C. albicans*). Related heparin binding motifs occur in surface proteins from *Staphylococcus epidermidis* (*S. epidermidis*) and *Staphylococcus aureus* (*S. aureus*).

Linear heparin binding motifs are sequential amino acids that conform to one of three consensus motifs (Cardin, Sobel, or Weintraub motifs); they have been identified in multiple mammalian proteins that bind heparin. While conformational heparin binding motifs also occur in some proteins, they must 55 be identified by crystal structure of the protein. Antibodies to these linear heparin binding motifs inhibited *C. albicans* from adhering to heparin bound to a plastic surface (a microtiter plate).

Of the six million patients who have a central line 60 implanted each year, more than 75,000 will develop blood-stream infections (23). Central line-associated blood stream infections (CLABSI) are a major source of hospital-acquired infection; over 43,000 CLABSI occurred among patients hospitalized in U.S. intensive care units (ICUs) in 2001, which is 65 3.2 infections for every 1000 line days. With a protocol for their sterile insertion and daily maintenance, CLABSI in

4

ICUs dropped to 18,000 in 2009, but even with these improvements in ICUs procedures, more than 23,000 CLABSI occurred in patients on inpatient wards and 37,000 CLABSI occurred in outpatient hemodialysis patients in 2009. Even with a 50% reduction in CLABSI in ICU patients, the annual cost of these infections across the U.S. is more than \$13 billion (23)

Staphylococcus epidermidis is the most common cause of CLABSI in central lines, with gram-negative rods second, S. aureus third; and Candida species fourth (24). In peripherally inserted central catheters (PICC), i.e., central lines inserted through peripheral veins in the arm, Candida species are the second most common cause of line infection (25). Candida spp. are equivalent to S. aureus in infections in central lines in the ambulatory setting (26). Among Candida spp, C. albicans is the most common cause of CLABSI (24).

When *Candida* species infect a central venous catheter, the organism enters the bloodstream to cause candidemia. Hosts at highest risk of candidemia, include burn patients and patients on a pump during coronary artery bypass procedures (27). Neutropenic oncology patients, premature newborns, and patients with major abdominal surgery such as intestinal resections are also high-risk patients with 8- to 16-fold the number of infections of other patient groups (27).

A major risk factor in candidemia is the presence of central lines (28-33), whose lumens are a site for formation of microbial biofilms that are effectively shielded from antimicrobial agents and host defenses. A second commonality is the use of heparin as an anticoagulant in most catheters. The amount of heparin is often considerable; e.g., a premature newborn in a neonatal intensive care unit may receive 150 units/kg/day, compared to 2.8 units/kg for a 70 kg adult receiving a 100 unit flush twice a day (20).

The ability to bind heparin is a unifying feature among *S. epidermidis, S. aureus*, and, *Candida albicans* (34-36), three of the leading causes of catheter-associated bloodstream infections. In experiments with *S. aureus*, high concentrations of heparin have been shown to increase *S. aureus* biofilm formation in vitro (37).

A first step in biofilm formation is microorganism adhesion or adherence to a surface of the implanted device, such as a catheter (38). In FIG. 1, negatively charged heparin molecules (circles) injected into the catheter lumen bind to the positively charged catheter surface, and heparin sulfate moieties (curved lines) are exposed on vascular endothelium lining catheter lumens. Linear heparin binding motifs present on the surface of microorganisms, such as C. albicans, interact either with heparin (A) or with heparin sulfate (B) and enable the organism to attach to the inside of the catheter. As the attached microorganisms replicate, they form the multilayered structure of a biofilm (C) and secrete the polysaccharide mortar-like matrix that holds the biofilm together. The inventors hypothesize that interactions between heparin and surface proteins on microorganisms such as C. albicans facilitate biofilm formation, and subsequent infection of the bloodstream when projections from biofilm break off into the catheter lumen and enter the bloodstream.

Heparin is associated with central line infections, particularly those due to *Candida* spp. In a randomized trial of 260 central lines, 128 were coated with chlorhexidine and 132 were coated with heparin; all *Candida* colonization and all candidemias occurred in patients whose central lines were coated with heparin (39). A second study in renal dialysis patients showed that those patients who received 5000 units of heparin in the middle of dialysis had considerably more catheter loss due to infection compared to patients not treated

5 with heparin. Although staphylococcal infections were most common in this patient group, candidemia also occurred (40).

One mechanism by which heparin interacts with proteins is through linear heparin binding motifs, conserved sequences of basic amino acids such as lysine, arginine, and histidine interspersed with hydropathic amino acids (14). Microbial heparin-binding proteins are identified by short consensus motifs of basic (B) and hydropathic (X) amino acids, as defined by Cardin [XBBXBX], Weintraub [XBBBXXBX], or Sobel [XBBBXXBBBXBBX].

In the invention, a computer-based algorithm examined all 400 C. albicans surface and cell wall proteins for heparin binding motifs (HBM). Of the 6,000 known Candida albicans proteins, about 400 are localized to the cell wall of yeast or hyphae, depending upon the extraction technique (41). A sequence-based search identified putative Cardin, Sobel, or Weintraub motifs in 159 C. albicans proteins. Table 1 shows HBM in cell surface proteins expressed by C. albicans. The 34 proteins in Table 1 include only those that have the attribution "cell surface", "fungal cell wall", "yeast cell wall", or "hyphal cell wall" as the cellular component in the Candida Genome Database, where \*=Weintraub motif; #=Cardin motif; ‡=Identified by molecular modeling studies; A="cell wall" in protein description (as of January 2011); obtained from Candida Genome Database (CGD); B="cell wall" in Gene Ontology (GO) annotation (as of January 2011); obtained from CGD; C=cell wall proteins as reviewed by Alberti-Segui (42) and D=cell wall proteins as reviewed by

The following procedure was used to identify a set of cell wall proteins in C. albicans with HBM. The first step combined evidence to identify possible cell wall proteins in C. albicans. Specifically, using "cell wall" as keywords, 154 putative cell wall proteins were identified from protein descriptions, and another 245 unique cell wall proteins were identified from Gene Ontology functional annotations from Candida Genome Database (www.candidagenome.org; Assembly 21). Also included were 125 non-redundant cell wall proteins identified by Alberti-Segui (50) and another 174 reported by Chaffin (22) and mapped annotations to Assembly 21. The second step screened for consensus HBM in protein ORF sequences of these cell wall proteins from Assembly 21. Three types of consensus motifs were included: Weintraub (XBBBXXBX), Sobel (XBBBXXBBXXBBX), and Cardin (XBBXBX) motifs, where B is a basic amino acid and X is a hydropathic amino acid. In the algorithm, basic amino acids are H, K, and R. Hydropathic amino acids are W, F, Y, L, I, C, M, G, V, S, T, A, N, P, and Q. A total of 159 cell wall proteins were identified that have possible HBM, and some have multiple motifs. The 159 proteins that met the search criteria were then manually curated to select only those proteins whose cell wall localization was confirmed by manual or computational methods in the Candida Genome Database.

6

Proteins with GPI anchoring sequences within these 159 cell wall proteins with HBM were further identified. Three Web servers were used to perform GPI anchoring sequence prediction: SignalP (43), GPI-SOM (44), and PredGPI (45). Combined results of these three prediction methods indicated that 15 out of these 159 proteins had GPI anchoring sequences, four of which overlapped with reviewed GPI anchoring proteins (46).

The algorithm identified 34 cell wall proteins with potential linear heparin binding sequences that matched the Cardin, Weintraub, and Sobel motifs. The 34 identified cell wall proteins were Ahp1, Als7, Atcl, Bud2, Cat1, Cef3, Chs1, Crh12, Dot4, Not5, Pdi1, Pga4, Pgk1, Phr3, Rbt1, Rps6A, Sam2, Srb1, Ssa2, Ssb1, Tdh3, Eft2, Eno1, Gap1, Gph1, Gpm2, Hem13, Hsp104, Hsp70 (also called Ssa1), Ino1, Int1, Ipp1, Ugp1, Xyl2. Three of these proteins, Als7, Pga4, and Rbt1, have GPI anchors. The genes encoding eleven of these proteins, Als7, Cat1, Dot4, Eno1, Gph1, Ino1, Rbt1, Sam2, Srb1, Ssa2, and Ugp1, are located in newly defined transcriptionally active regions that are critically involved in biofilm formation (22). Moreover, many of these proteins are known to be regulated by at least one of six master biofilm regulators; by RNA-seq, where RNA-seq is defined as the use of highthroughput sequencing techniques to sequence cDNA in order to get sequence information about the transcriptome, the sample's RNA content; CAT1, GAP1, GPH1, and HSP104 are up-regulated in biofilm formation, while CHS1, EN01, GPM2, HEM13, INO1, IPP1, PGK1, RPS6A, SAM2, SRB1, SSA2, SSB1, and TDH3 are down-regulated (22)

Given the presence of putative HBM among C. albicans surface proteins and the possible interactions with heparin in central venous catheters or with heparin sulfate proteoglycans expressed on host tissues such as vascular endothelium, the biochemical determinants and immunologic consequences of this interaction were defined. The protein Int1 (SEQ ID NO: 5) (accession number P53705.2; GI 187608862) had the highest number of HBM (five). Int1 (SEQ ID NO: 5) spans 1711 amino acids and is localized to the cell wall of the bud neck in C. albicans. It mediates adhesion, hyphal formation, and virulence, defined as the ability to cause disease such as bloodstream infection (47). Using the same search technique, HBM were also detected in surface proteins of S. epidermidis and S. aureus.

TABLE 1

Gene ID (Assembly 21)	Protein	Ref.	# of motifsMotif 1	Motif 2	Motif 3	Motif 4	Motif 5
orf19.4257	Int1	С	5 <sub>804</sub> QKKHQI (SEQ ID		1530MKRGKP# 40)(SEQ ID NO:		(SEQ ID
orf19.1738	Ugp1	B, D			368IRHFKG <sup>#</sup> 41) (SEQ ID NO:	49)	
orf19.3370	Dot4	В			635FKRFKF# 42)(SEQ ID NO:	50)	
orf19.3651	Pgk1	A, B, D	150	1-10	<sub>168</sub> AHRAHS <sup>#</sup> 43)(SEQ ID NO:	51)	
orf19.4660	Rps6A	B, D	100	<sub>192</sub> AKKVKN <sup>#</sup> ))(SEO ID NO:	44)		

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				14000	CONCINCE			
Gene ID (Assembly 21)	Protein	Ref.	# of motif	s Motif 1	Motif 2	Motif 3	Motif 4	Motif 5
orf19.5107	Not5	В	2	114QKRSRF# (SEQ ID NO:	333VKKLKP# 11)(SEQ ID NO:	45)		
orf19.5130	Pdi1	D	2	210NKKFKN# (SEQ ID NO:	301GKKYRG# 12)(SEQ ID NO:	46)		
orf19.6387	Hsp104	D	2	53VKRARY# (SEQ ID NO:	199ARRSKS# 13)(SEQ ID NO:	47)		
orf19.1065	Ssa2	B, D	1	258LRRLRT <sup>#</sup> (SEQ ID NO:	14)			
orf19.1067	Gpm2	В	1	45IKKNHL# (SEQ ID NO:	15)			
orf19.1327	Rbt1	А, В, С	1	121GKKVKQ# (SEQ ID NO:	16)			
orf19.2762	Ahp1	B, D	1	171LKRIHN <sup>#</sup> (SEQ ID NO:	17)			
orf19.2803	Hem13	B, D	1	257IRRGRY# (SEQ ID NO:	18)			
orf19.3590	Ipp1	B, D	1	<sub>74</sub> TKKGKL <sup>#</sup> (SEQ ID NO:	19)			
orf19.377	Phr3	В, С	1	115PHHHLNRY* (SEQ ID NO:				
orf19.395	Eno1	B, D	1	141AKKGKF# (SEQ ID NO:	21)			
orf19.3966	Crh12	А, В, С	1	420TKHIHN# (SEQ ID NO:	22)			
orf19.4035	Pga4	B, C, D	1	<sub>259</sub> AKRPRP <sup>#</sup> (SEQ ID NO:	23)			
orf19.4152	Cef3	В	1	623LRKYKG# (SEQ ID NO:	24)			
orf19.4304	Gap1	В	1	72QRKLKT# (SEQ ID NO:	25)			
orf19.4980	Ssa1	B, D	1	259LRRLRT# (SEQ ID NO:	26)			
orf19.5188	Chs1	В, С	1	126PKRQKT# (SEQ ID NO:	27)			
orf19.5788	Eft2	B, D	1	581NKHNRI <sup>#</sup> (SEQ ID NO:	28)			
orf19.6190	Srb1	B, D	1	123FHKAHG <sup>#</sup> (SEQ ID NO:	29)			
orf19.6214	Atc1	А, В	1	<sub>959</sub> PKRVKV <sup>#</sup> (SEQ ID NO:	30)			
orf19.6229	Cat1	В	1	82GKKTRI# (SEQ ID NO:	31)			
orf19.6367	Ssb1	B, D	1	263LRRLRT# (SEQ ID NO:	32)			
orf19.657	Sam2	B, D	1	380PKKLKF# (SEQ ID NO:	33)			
orf19.6814	Tdh3	B, D	1	<sub>70</sub> GHKIKV <sup>#</sup> (SEQ ID NO:	34)			
orf19.7021	Gph1	B, D	1	656TKHHIPKA*				

TABLE 1 -continued

Gene ID (Assembly 21)	Protein	Ref.		of tif:	sMotif 1	Motif 2	Motif 3	Motif 4	Motif 5
orf19.7400	Als7	В, С		1	1482 SKRNKN <sup>#</sup> (SEQ ID NO:	36)			
orf19.7585	Ino1	B, D		1	161 MKRAKV <sup>#</sup> (SEQ ID NO:	37)			
orf19.7676	Xy12	А, В	D	1	330THRFKF# (SEQ ID NO:	38)			
orf19.940	Bud2	В		1	716LRKGKS <sup>#</sup> (SEQ ID NO:	39)			

Heparin effect on Candida albicans growth and morphology was determined. A single colony of BWP17 wt was inoculated into 3 ml YPD medium and incubated overnight at 30° C. with shaking at 225 rpm. Overnight cultures were diluted to an OD<sub>600</sub> of 0.1 in 5 ml of YPD (yeast) or RPMI-HEPES (hyphae) in a 50 ml conical polypropylene tube and incubated in the presence or absence of 100 units/ml preservative-free pharmaceutical heparin at 30° C. for six hours. Cells (1 ml) were fixed with an equal volume of 4% formal- 25 dehyde in FACS buffer at 4° C. for one hour, then pelleted (7,000 rpm for 3 minutes) and washed with PBS. After reconstitution in 0.5 ml PBS, filipin (50 mg/ml stock solution in DMSO) was added to a final concentration of 100 µg/ml and incubated with cells at room temperature for five minutes. 30 Cells were pelleted, washed with PBS and mounted on a slide using Fluoromount G. For calcofluor white staining, after six hours incubation, 1 µl of 1 mg/ml stock solution of calcofluor white in 0.1 N NaOH was added to 100 µl cells to a final calcofluor white concentration of 10 μg/ml.

Microscopy was performed by imaging filipin, PKH26, DAPI, and heparin-Alexa Fluor 488 on a Nikon Ti-E inverted microscope with a 100×CFI APO oil NA 1.49 objective. Filipin was excited with a Prior Lumen 200 metal halide light source set at 10% light output. This light was further attenu- 40 ated by ND4 and ND8 neutral density filters in series to reduce light output to approximately 3% of output from the liquid light guide. The filters used for imaging were EX 360/40, dichroic 400 nm Ip, EM 460/50. Images were acquired with an Andor iXon emccd camera. Exposure times 45 were 391 ms. Excitation of PKH26/DAPI/Heparin-Alexa Fluor 488 triple staining was accomplished with a Nikon A1R si laser scanning confocal. DAPI was imaged with 405 nm excitation and a 450/50 filter with a laser power of 16.3 and a photomultiplier tube (pmt) voltage of 92. Alexa Fluor 488 50 was imaged with 488 nm excitation from an Argon-ion laser and a 525/50 filter with a laser power of 6.0 and a pmt voltage of 84. PKH26 was imaged with 561 nm excitation and a 595/50 filter with a laser power of 13.2 and a pmt voltage of 108. Gains were kept below 110 to eliminate contribution 55 from C. albicans autofluorescence; lack of autofluorescence was confirmed by comparison to a control sample without heparin-Alexa Fluor 488. Images were processed with Nikon NIS-Elements AR 4.11.00 64-bit software. Calcofluor white slides were examined using a Zeiss Axiovert 200M fluorescent microscope equipped with a Plan-Apochromat 63×/1.40 oil objective lens with 1.6x optivar and DAPI filter at 350 nm excitation and 460 nm emission. Images were captured using a Zeiss Axiocam color camera and processed with Axiovision version 4.8.2.

Flow cytometry was performed by inoculating a single colony of BWP17 wt into 3 ml YPD medium and incubating

overnight at 30° C. with shaking at 225 rpm. Overnight cultures were diluted to OD<sub>600</sub> of 0.1 in 5 ml of YPD or RPMI-HEPES and incubated in the presence or absence of 100 units/ml preservative-free pharmaceutical heparin at 30° C. for one hour. One ml aliquots of each mixture were removed, pelleted (7,000 rpm for 3 min), washed twice with PBS, and reconstituted in 1 ml PBS. Flow cytometry analysis was performed using the Imagestream flow cytometer (Amnis, Seattle Wash.) equipped with a 405 nm, 488 nm, 653 nm, laser and multi-mag function. The 40× magnification, 10 mm/sec flow rate, and 488 nm laser were used to collect SSC and Brightfield parameters. The flow cell allows particles up to 100 µm wide (height unlimited) to be collected in the instrument. INSPIRE (v.6.0) software was used to acquire events. Software analysis using IDEAS (v5.0) identified percent hyphae using aspect ratio, height and width features using the side scatter (Channel 6) and brightfield (Channel 1) parameters. Objects were selected within each file and tagged to use 35 as identification of truth sets within the population.

For growth curves in the presence or absence of soluble heparin, a single colony of BWP17 wt was inoculated into 3 ml YPD medium and incubated overnight at 30° C. with shaking at 225 rpm. Overnight cultures were diluted to an OD<sub>600</sub> of 0.1 in 5 ml of YPD, RPMI-MOPS, RPMI-HEPES or CSM in a 50 ml conical polypropylene tube. Preservative-free pharmaceutical heparin (1000 units/ml) was added to yield a final concentration of 100 units/ml in the heparin-treated samples. Cultures were grown at 30° C. with shaking and  $OD_{600}$  measured periodically. Doubling times  $(t_d)$  were calculated based on the equation  $t_d=\ln 2/\mu$  ( $\mu=\text{specific growth}$ rate (48). One hundred units/ml heparin, the concentration recommended to prevent clotting of central venous catheters (20), had no effect on doubling times of planktonic yeast cells grown in YPD, RPMI-HEPES, RPMI-MOPS or CSM, as shown in FIGS. 2A and 2B.

FIGS. **2**A-E demonstrate lack of an effect by heparin on wild type *Candida albicans* (*C. albicans*) planktonic growth and morphology.

FIG. 2A shows that growth curves in the presence (open circles) or absence (closed diamonds) of soluble heparin were identical

FIG. 2B shows that doubling times in various media at  $30^{\circ}$  C. in the absence and presence of heparin (100 units/ml) were identical.

FIG. 2C shows that percent hyphae as determined by flow cytometry did not differ after incubation with or without heparin (100 units/ml) under conditions that favor yeast (YPD, 30° C.) or hyphae (RPMI-HEPES, 37° C.).

FIGS. 2D-E show that the integrity of membrane sterols identified with filipin (FIG. 2D) and the location of septin rings identified with calcofluor white staining (FIG. 2E) were

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identical between untreated and heparin-treated organisms. Thus, concentrations of heparin commonly used to maintain patency of central venous catheters (100 units/ml) did not lead to readily observable differences in growth or cellular architecture of the organism.

Binding of heparin by *C. albicans* was examined in vitro. Heparin was labeled with Alexa Fluor 488 by a method modified from Osmond (49). Briefly, 5 mg heparin (Sigma) was dissolved in 0.5 ml MES buffer (0.1M 2-(N-morpholino) ethanesulfonic acid hydrate, pH 4.5, Sigma), then mixed with 10 a solution of 1 mg Alexa Fluor 488 hydrazide (Life Technologies) in 0.4 ml MES buffer. After adding 0.2 ml of EDC solution (15 mg 1-ethyl-3-(3-dimethylaminopropyl) carbodiimide/ml water, Thermo Scientific), the mixture was stirred at room temperature for 30 min. A second 0.2 ml aliquot of 15 EDC solution was added and the mixture stirred at room temperature for an additional 30 min. After adding 1.3 ml NaOAc (1 M, pH 4.8) and stirring at room temperature for one hour, heparin-Alexa Fluor 488 was purified on a PD-10 desalting column (GE Healthcare) equilibrated in autoclaved 20 nanopure water. Fractions containing the labeled material detected at 490 nm were combined and dried overnight on a SpeedVac concentrator (Savant) with heating. The resulting solid was dissolved in autoclaved nanopure water to 10 mg/ml and stored at 4° C.

Heparin-Alexa Fluor 488 bound to PKH26- and DAPIlabeled C. albicans. A single colony of BWP17 wt was inoculated into 3 ml YPD medium and incubated overnight at 30° C. with shaking at 225 rpm. Using a PKH26 Red Fluorescent Cell staining kit (including PKH26 dye and diluent C, 30 Sigma),  $2\times10^7$  cells were mixed with 1 ml diluent C. To this solution was added a mixture of 4 µl PKH26 dye in 1 ml diluent C, and the mixture allowed to stand at room temperature for 3 min. After adding 10 ml 3% BSA, the mixture was centrifuged at 3,000 rpm for 7 min. The resultant magentacolored cells were washed with 10 ml each of 1% BSA and PBS, with centrifugation after each step. After supernatant removal, the cells were reconstituted in 10 ml fresh PBS. Two 1 ml (2×10<sup>6</sup> cells) aliquots were placed in separate 15 ml conical tubes, centrifuged, and supernatants removed. Each 40 was reconstituted with 2 ml YPD, and heparin-Alexa Fluor 488 (0.1 ml of above 10 mg/ml solution) was added to the experimental sample. Control and experimental samples were incubated at 30° C. with shaking (225 rpm) for 30 min, at which time 0.4 ml aliquots of each were removed, pelleted 45 (10,000 rpm for 3 min), and washed twice with PBS. After reconstitution with 0.5 ml PBS, DAPI (4',6-diamidino-2-phenylindole dihydrochloride (Sigma, stock solution of 5 mg/ml) was added to a final concentration of 1 μg/ml and the solution allowed to stand at room temperature for 10 min. Cells were 50 pelleted and washed twice with PBS, then mounted on a microscope slide using Fluoromount G.

To measure the binding of *C. albicans* to solid-phase heparin, a heparin-binding ELISA assay was developed, as follows. A single colony of each *C. albicans* wild type or mutant strain from a YPD plate was inoculated into 3 ml YPD medium and incubated overnight at  $30^{\circ}$  C. with shaking at 225 rpm. Sigma heparin (fresh solution made daily), diluted to 25 units/ml in autoclaved, sterile-filtered PBS was added as 0.1 ml aliquots to each well of an allyl amine-coated 96-well heparin binding microtiter plate (BD Biosciences). The plate was incubated at room temperature overnight in the dark (50). In the morning, the plate was washed with acetate buffer (100 mM NaCl,  $50 \mu$ M NaOAc, 0.2% Tween  $20 \mu$ PH  $3.2 \mu$ Ph 3.2

12

of 0.2 in 25 ml of YPD, and grown at 30° C. to mid-log phase  $(OD_{600} 0.6-0.7)$ . Cells were pelleted (3,000 rpm for 7 minutes), washed twice with PBS and reconstituted in RPMI-HEPES to  $4\times10^5$ ,  $2\times10^5$ , and  $1\times10^5$ CFU/ml, respectively. One hundred ul of each C. albicans dilution was applied to the microtiter wells; experiments for each strain were performed in quadruplicate. The plate was incubated at 30° C. for one hour and washed with PBS to remove non-adherent C. albicans. One-tenth ml of a biotinylated polyclonal rabbit anti-C. albicans antibody raised against soluble proteins in a C. albicans lysate (Meridian Life Science), which had been diluted 1:2500 in FACS-Tween (0.05% Tween 20 in FACS buffer consisting of 0.3% BSA), was added to each well. The plate was incubated at 30° C. for one hour, then washed with PBS-Tween (0.05% Tween 20 in PBS). One-tenth ml streptavidin alkaline phosphatase (Biolegend) diluted 1:10,000 in FACS-Tween was then added to each well, and the plate was incubated at 30° C. for 30 minutes. After washing with PBS-Tween and AKP buffer (100 mM Tris base, 50 µM MgCl<sub>2</sub>, 100 mM NaCl, pH 9.5.), 0.1 ml alkaline phosphatase substrate (KPL) was added to each well. After 45 minutes, absorbance at 595 nM was read on a Beckman Coulter DTX 880. When desulfated heparin analogs, chondroitin sulfate, or der-25 matan sulfate were used, equimolar amounts of the analogs (with respect to heparin) were applied to the allyl aminecoated 96-well plate instead of heparin.

The ability of soluble heparin to inhibit C. albicans binding to plate-bound heparin was demonstrated by pre-incubating  $1\times10^6$  CFSE-labeled C. albicans with 200 units heparin at 37° C. for one hour in wells of a 96-well black plate. C. albicans was labeled with carboxyfluorescein succinimidyl ester (CFSE), succinimidyl ester (CFSE; Invitrogen), which is used to track cell division and therefore does not kill the organism (28), as follows. A single colony of C. albicans was suspended in CSM to an OD<sub>600</sub> of 0.1, diluted 1:200 into 25 ml CSM and grown at 30° C. overnight to mid-log phase  $(OD_{600} 0.6-0.7)$ . Cells were washed twice in sterile PBS and suspended in PBS at 2×10<sup>7</sup> CFU/ml. Carboxyfluorescein succinimidyl ester (Life Technologies) was dissolved in DMSO, diluted in PBS to 50 µM, and 0.5 ml CFSE mixed with 0.5 ml C. albicans suspension. The mixture was incubated for 20 min at room temperature on a rotator, washed once with FACS buffer, once with PBS, then suspended in 1 ml FACS buffer. Intensity of labeling was determined as the mean fluorescence intensity using a BD Accuri C6 cytometer (San Jose, Calif.) with excitation at 488 nm and a 533/30 emission filter. Wells of a black 96-well microtiter plate were incubated with 0.1 mg poly-D-lysine for one hour at room temperature, washed three times with PBS, then incubated with 200 units of heparin in 100 µl RPMI-HEPES overnight at room temperature. The following afternoon, C. albicans wild type strain and mutants were labeled with CFSE as follows: after growth of C. albicans to mid-log phase in CSM medium, organisms were washed two times in PBS and suspended in PBS at a concentration of  $2\times10^7$ /ml. 0.5 ml cells was mixed with 0.5 ml CFSE, covered in foil, and rotated on a mixer for 20 minutes at room temperature. CFSE-labeled C. albicans cells were pelleted in a minifuge at 3000 rpm for four minutes, washed once with FACS buffer (0.3% bovine serum albumin in PBS), washed again with PBS, and then suspended in 1 ml FACS buffer at a concentration of  $1\times10^7$ /ml. 100 µl CFSElabeled C. albicans  $(1\times10^6)$  were deposited in test wells for 60 minutes at room temperature. At the end of the incubation period, wells were washed three times with PBS, and fluorescence in each well was measured (Beckman Coulter Multimode detector DTX880).

FIGS. **3**A-D demonstrate *C. albicans* binding to heparin in vitro. FIG. **3**A shows confocal microscopy of *C. albicans* in the presence of heparin-Alexa Fluor 488, with (i) *C. albicans* cell wall stained with PKH26, (ii) nucleus stained with DAPI, (iii) cell wall outlined by heparin-Alexa Fluor 488, and (iv) arrows indicating co-localization of heparin with *C. albicans* cell surface. Incubation of *C. albicans* with 100 units/ml heparin-Alexa Fluor 488 for 30 mins at 30° C. demonstrated co-localization of heparin with the *C. albicans* cellular surface (FIG. **3**A). Heparin deposition was seen at the interface of adjoining yeast cells and in individual cells.

FIG. 3B shows binding of 10,000 colony-forming units (CFU) *C. albicans* (OD<sub>595</sub>) to increasing concentrations of heparin immobilized on an allyl amine-coated 96-well microtiter plate; values are  $\pm$ SD of duplicate wells. Binding of *C. albicans* at 10,000 CFU/well did not change over heparin concentrations ranging from 1.25 units/well (6.3  $\mu$ g/well) to 20 units/well (100  $\mu$ g/well) (FIG. 3B), indicating saturation of the allyl amine plate by heparin in low concentrations.

FIG. 3C shows the linear dose-response for the heparin binding ELISA assay with 2.5 units/well heparin and increasing *C. albicans* input from 10,000 (left-most bar), 20,000 (center bar), and 40,000 (right-most bar) CFUs; the graph represents mean $\pm$ SD of four experiments, \*p<0.007 for all 25 inputs. FIG. 3C shows that the OD<sub>595</sub> of the ELISA assay increases linearly as input of *C. albicans* increased from 10,000 colony forming units (CFU)/well to 40,000 CFU/well.

FIG. 3D shows binding of *C. albicans* (40,000 CFU/well) 30 to equimolar amounts of heparin analogs desulfated at the 2-O (second from the left bar), 2-N (second from the right bar), or 6-O (right-most bar) positions versus heparin control (left-most bar) (normalized to 100%), with the graph representing mean±SD of three experiments, performed in triplicate \*p≤0.003, \*\*p=0.20 vs. heparin control. With equimolar amounts of desulfated heparins, binding of *C. albicans* was decreased by 11% when heparin was desulfated at the 2-0 position of iduronic acid (p=0.003), and by 21% when heparin was desulfated at the 2-N position of glucosamine 40 (p=0.002) (FIG. 3D). Removal of the sulfate group at the 6-O position of glucosamine did not significantly reduce binding.

Pre-incubation of CFSE-labeled *C. albicans* with 100 units/ml heparin decreased binding to heparin by 27% (p=0.022; data not shown). *C. albicans* also recognizes the 45 related structures of chondroitin sulfate and dermatan sulfate.

14

These results also suggested that surface components of *C. albicans* may mediate *C. albican* binding to heparin.

Location of HBM in Int1 (SEQ ID NO: 5) were determined. Five overlapping polypeptides spanning amino acids 51-1711 of Int1 were expressed with a 6×His tag (SEQ ID NO: 54) in S. cerevisiae BJ3501 and purified by affinity chromatography (HisTrap column; GELifesciences). Fractions containing the His-tagged polypeptide were pooled, diluted with loading buffer (10 mM phosphate, pH 7.0 plus 250 mM NaCl) and applied to a heparin sepharose column (HiTrap Heparin HP; GE Lifesciences). Heparin-binding polypeptides were eluted with a step gradient of NaCl (0.5-2 M) in loading buffer. Eluted fractions were analyzed by SDS-PAGE and immunoblot using anti-His tagged antibody (Santa Cruz) and chemiluminescent detection (SuperSignal West Pico Mouse IgG Detection Kit, Pierce) according to manufacturers' instructions. Polypeptides spanning aa 656-1193 and aa 1548-1711 bound to heparin-Sepharose and were eluted with NaCl, indicating that the HBM in those domains, schematized as Motif 1 (SEQ ID NO: 1), Motif 4 (SEQ ID 20 NO: 2), and Motif 5 (SEQ ID NO: 3) (FIG. 4A), were candidates for mediating binding to heparin. Bolded letters represent basic amino acids in heparin binding motifs; unbolded letters represent hydropathic residues. Polypeptides spanning aa 51-385, aa 385-659, and 1188-1551 failed to bind to a heparin-Sepharose column.

The linear polypeptide spanning aa 656-1193 contains one potential heparin binding site, 804QKKHQIHK (SEQ ID NO: 1) (basic residues shown in red) (Motif 1 in Table 1 and FIG. 4A). The linear polypeptide spanning aa 1548-1711 contains a canonical Weintraub motif <sub>1593</sub>FKKRFFKL (SEQ ID NO: 2) (Motif 4 in Table 1 and FIG. 4A) and a canonical Cardin motif <sub>1612</sub>SHKTRA (SEQ ID NO: 3) (Motif 5 in Table 1 and FIG. 4A). Sequence homology search using BLAST indicated that aa 1548-1711 contains a Pleckstrin homology domain (PHD), which is structurally resolved. Using homology-based 3-D modeling, we found that the three lysine residues and single arginine residue in Motif 4 were located on the rim of the PHD and might facilitate binding to a strong anion such as heparin by electrostatic interaction (FIG. 4B, arrows). The Cardin motif (Motif 5) did not share this conformation.

To test whether 804QKKHQIHK (SEQ ID NO: 1) (Motif 1) and/or 1593FKKRFFKL (SEQ ID NO: 2) (Motif 4) mediated the binding of heparin to *C. albicans*, standard PCR-mediated mutagenesis (51) was used to construct a set of isogenic INT1 disruptants and mutants (Table 2).

TABLE 2

Strain	Abbreviation	Genotype	Source
BWP17	_	ura3::imm434/ura3::imm434 his1::hisG/his1::hisG arg4::hisG/arg4::hisG	[27]
BWP17WT	WT	BWP17 plus arg4::ARG4::URA3/his1::hisG::HIS1	[27]
VBIDM2	_	as BWP17 plus int1::ARG4/int1::URA3	[60]
VBIDM6-2	DD	as VBIDM2 plus his1::hisG/HIS1	[60]
KO503	Motif 4	VBIDM2 plus his1::hisG::HIS1-INT1 (KK1595AA)	current
KO507	Motif 1	VBIDM2 plus his1::hisG::HIS1-INT1(KK804AA)	current
KO508	Motifs 1&4	VBIDM2 plus his1::hisG::HIS1-INT1(KK804AA, KK1595AA)	current
KO509	Reint	VBIDM2 plus his1::hisG::HIS1-INT1 (WT)	current

Binding of *C. albicans* to heparin and to chondroitin sulfate was equivalent, but binding to dermatan sulfate was reduced (p=0.019; data not shown). These results confirmed that the binding of *C. albicans* to heparin and similar glycosaminoglycans (chondroitin sulfate and dermatan sulfate) could be reproducibly measured and, in the case of heparin, specifically inhibited by pre-incubating the organisms with heparin.

Construction of mutants was as follows. *C. albicans* genomic DNA was isolated from saturated overnight cultures using glass beads as described (52). A lithium acetate method was used to transform *C. albicans* (41). Plasmids and PCR products were purified using kits (Fermentas/ThermoFisher, Pittsburg Pa.) or established methods (53). Pfu enzyme (New England Biolabs) with High Fidelity buffer was employed for

all amplifications. Products were sequenced to affirm fidelity prior to use. Primers are described in Table 3.

units (12.5  $\mu$ g) heparin in 100  $\mu$ l phosphate buffered saline (PBS) per well. The plate was covered and allowed to stand at

TABLE 3

Primer	Internal reference	Purpose	
1	SAC2035UP	gggagctcGTTACTTGTCATTAATTAGTTACTTCC (SEQ ID NO: 55)	SacI 5' INTI
2	MLU3'UTR	ggacgcgtTTTTATCTTTTTATGTAAATATATACTA (SEQ ID NO: 56)	MluI 3'INT1
3	INT1 KR1595AA F	ATTGTCCAATTTTTAAGGCTGCTTTTTTCAAATTAAT GGG (SEQ ID NO: 57)	mutate Motif 1
4	INT1 KR1595AA R	CCATTAATTTGAAAAAAGCAGCCTTAAAAATTGGAC AATC (SEQ ID NO: 58)	mutate Motif 1
5	INT1 KK805AA F	GCATAAACAAGAAAAGCAGGCCGCCCATCAAATTC ATAAAGTTCC (SEQ ID NO: 59)	mutate Motif 4
6	INT1 KK805AA R	GGAACTTTATGAATTTGATGGGCGGCCTGCTTTTC TTGTTTATGC (SEQ ID NO: 60)	mutate Motif 4
7	GHISR	CTCCCGGCCGCCATGGCCGC (SEQ ID NO: 61)	check integration
8	HIS3AMP	GTTGGTGTGGCCCAGAGACTCT (SEQ ID NO: 62)	check integration

A single copy of Int1, including 1450 bp upstream and 548 bp downstream from the Int1 open reading frame (www.candidagenome.org, Assembly 21), was integrated into the hisG 30 locus of the int1-/- strain VBIDM2 (54) to produce the reconstituted strain KO509. Briefly, a copy of Int1 was generated by PCR, using primers 1 and 2 with BWP17 wt DNA as template and cloned into the SacI/MluI sites of pGEMHIS (51) to create pKO509. pKO509 was digested with SwaI and 35 transformed into VBIDM2 to create the reconstituted strain KO509. PCR-mediated overlap extension mutagenesis (55) was used to produce copies of Int1 mutated at putative heparin binding domains. Briefly, primer pairs 1+3 and 2+4 (or 1+5 and 2+6) were used to produce two overlapping fragments of 40 INT1 in which putative heparin binding domains were mutated (FKKRFFKL (SEQ ID NO: 2)→FKAAFFKL (SEQ ID NO: 53) or KQKKHQ (SEQ ID NO: 64)→KQAAHQ (SEQ ID NO: 63)), and a full length mutated sequence generated in a third per using primers 1+2 with the fragments as 45 template. The mutated sequences were cloned into the SacI/ MluI sites of pGEMHIS to create pKO503 and pKO507. respectively. A construct mutated at both sites (pKO508) was produced using primers 1+5 and 2+6 with plasmid DNA from pKO503 as template. Full length mutated products cloned 50 into pGEMHIS and used to transform VBIDM2 as above, producing strains KO503, KO507, and KO508. The correct insertion and orientation of all constructs was confirmed by PCR. In growth curves performed with and without 100 units/ ml heparin at 30° C. in RPMI-HEPES, there was no differ- 55 ence in the doubling times of the wild type,  $\Delta$ int1 mutant, INT1 reintegrant, or the reintegrants containing alanine substitutions in Motif 1 (804QKKHQIHK (SEQ ID NO: 1) to QAAHQIHK (SEQ ID NO: 52)), Motif 4 (1593FKKRFFKL (SEQ ID NO: 2) to FKAAFFKL (SEQ ID NO: 53)), or Motifs 60 1 and 4. Percent binding of each mutant to heparin in the ELISA assay was compared to the wild type according to the  $formula \quad [Absorbance_{595} \quad mutant]/[Absorbance_{595} \quad wild$ type]×100.

The ELISA assay used a commercially available 96-well 65 microtiter plate coated with polymerized allylamine (BD Biosciences) (27), in which wells were inoculated with 2.5

room temperature overnight, then washed with acetate buffer (100 mM NaCl, 50 mM NaOAc, 0.2% Tween, pH 7.2). Wells were washed three times with PBS, then inoculated with  $1\times10^4$  to  $4\times10^4$  Candida albicans yeast cells that were grown overnight at 30° C. in yeast peptone dextrose (YPD) broth, washed, and resuspended in RPMI-HEPES at 1×10<sup>7</sup> organisms/ml. The plate was then incubated at 30° C. for one hour, then washed with PBS-Tween (PBST, PBS/0.05% Tween). A commercially available biotinylated anti-Candida antibody (Meridian Life Science, Memphis Tenn.) was diluted 1:1500 in FACS-TWEEN (0.3% BSA/0.05% Tween), added to the wells, incubated at 30° C. for one hour, then washed with PBST. Streptavidin-alkaline phosphatase (BioLegend, San Diego Calif.) was then added to the wells at a 1:10,000 dilution in FACS-TWEEN and incubated at 30° C. for 30 min, then washed with PBST and AKP buffer (100 mM Tris, 100 mM NaCl, 50 mM MgCl<sub>2</sub>\*6H<sub>2</sub>O). BluePhos<sup>@</sup> microwell substrate (Kirkegaard and Perry Laboratories, Gaithersburg Md.) was added to the wells and allowed to react for 45 min at room temperature. The color change was read spectrophotometrically at absorbance of 595 nm.

FIGS. **4**A-D show that linear heparin binding motifs in *C. albicans* Int1 mediate binding to heparin.

FIG. 4A illustrates the five putative heparin binding sites in Int1. Mutations were made by substituting alanine residues in Motif 1: <sub>804</sub>QKKHQIHK (SEQ ID NO: 1) to QAAHQIHK (SEQ ID NO: 52) (Table 1, Motif 1) and in Motif 4: <sub>1593</sub>FKKRFFKL (SEQ ID NO: 2) to FKAAFFKL (SEQ ID NO: 53) (Table 1, Motif 4). A third reintegrant had alanine substitutions at both sites.

FIG. 4B shows molecular modeling of Motif 4, which predicts that the three lysine residues and the single arginine residue (arrows) might facilitate binding to a strong anion like heparin.

FIG. 4C shows heparin binding of *C. albicans* WT (normalized to 100%), Δint1 double disruptant (DD), and four single-copy reintegrants: (1) Reint contains one wild type copy of Int1; (2) Motif 1 mutant contains alanine substitutions for lysine residues at positions 805/806 (<sub>804</sub>QAAHQIHK (SEQ ID NO: 52)); (3) Motif 4 mutant contains alanine

16

substitutions for lysine 1595 and arginine 1596 (1593FKAAFFKL (SEQ ID NO: 53)), and (4) Motif 1&4 mutant contains alanine substitutions at both sites. Binding to heparin was highest for the wild-type C. albicans strain that expressed both copies of the INT1 gene. Disruption of both 5 copies of INT1 (DD) reduced the binding of heparin by 40% (p=0.031) despite removing just one of the 34 C. albicans genes encoding putative linear HBM. Reintegration of one copy of the wild type INT1 gene (Reint) partially restored the ability of C. albicans to bind to heparin. Differences in hep- 10 arin binding among the WT, Reint and DD strains were statistically significant (p=0.031 in all cases). Among the three isogenic strains with alanine mutations in putative heparin binding sites, mutation of Motif 1 was associated with the largest reduction in heparin binding, compared to the wild 15 type strain (p=0.031), to the Motif 4 mutant (p=0.036), and to the Motif 1&4 mutant (p=0.031). Results with the Motif 1 mutant were not significantly different from the percent binding observed with the double disruptant (p=0.063) or the reintegrant (p=0.115), nevertheless, this trend of reduced 20 binding suggested that lysine residues in Motif 1 might be likely mediators of heparin binding. Results are presented as mean±SD for n=5 experiments performed in quadruplicate, \*p=0.031, \*\*p=0.036.

Because Motif 1 in Int1 appeared to mediate a considerable 25 proportion of the binding of C. albicans to heparin, a peptide encompassing this motif HKQEKQKKHQIHKV (SEQ ID NO: 4) was used to immunize rabbits with a commercial protocol (Pacific Immunology). Affinity-purified immune IgG and IgG from pre-immune rabbit serum (both from 30 Pacific Immunology) were compared for the ability to inhibit binding of C. albicans to heparin (FIG. 5). Antibody and heparin inhibition studies were performed as follows. Antibody was produced and tested by Pacific Immunology, Ramona, Calif. (www.pacificimmunology.com; NIH Animal 35 Welfare Assurance Number A41820-01; USDA License 93-R-283). A peptide corresponding to amino acids 799-812 of Int1 (HKQEKQKKHQIHKV (SEQ ID NO: 4)), encompassing Motif 1, was conjugated to KLH via an N-terminal cysteine residue and used to immunize two NZW rabbits. The 40 animals were immunized once with conjugated peptide in a proprietary formulation of Freund's complete adjuvant and boosted 3 times with conjugated peptide in Freund's incomplete adjuvant. The same peptide was conjugated to CNBr-Sepharose and used for affinity purification of epitope-spe- 45 cific IgG. The final serum titer for both animals was >1:100, 000 by ELISA. Both pre-immune rabbit serum and serum from bleed 3 were chromatographed on a 2 ml Protein A column (Thermo Scientific) to yield pre- and post-immune IgG and brought to a concentration of 1.6 mg/ml. 100 μl 50 poly-D-lysine (MP Biomedicals, Solon Ohio) diluted as 1 mg in 10 ml distilled water was added to each well of black 96-well plates (Costar) and incubated at room temperature for 60 min. After three washes with PBS, 100 μl pharmacologic heparin (2000 units/ml in RPMI-HEPES) was added to each 55 well and incubated overnight at room temperature in the dark. In the morning, the plate was washed three times with PBS, then a 1:1000 dilution of pre- or post-immune IgG in PBS was added to each well and incubated for 30 min at room temperature. After overnight growth to mid-exponential phase in 60 CSM, C. albicans wild type and double disruptant strains were labeled with CFSE as above. After labeling, samples of each strain were removed to determine the intensity of labeling by flow cytometry, as described above. CFSE-labeled C. albicans were diluted in RPMI-HEPES to yield 1×10<sup>6</sup> cells 65 per 100 µl and added to each well for 60 min at 30° C. The plate was washed three times with PBS; fluorescence in each

18

well was measured with a Beckman DTS 880. Experiments were performed in triplicate. For heparin inhibition studies, wild type C. albicans were grown as above, labeled with CFSE, and washed to remove excess CFSE. Organisms were pelleted, the supernatant was removed, and the pellets were suspended in 2 ml pharmacologic heparin (20,000 units/ml) diluted with RPMI-HEPES to a concentration of 250 units/ml (1.3 mg/ml). CFSE-labeled C. albicans were incubated with heparin for 60 min at 37° C. with shaking at 400 RPM, then added to the wells of a black plate, incubated for 60 min at RT, and washed three times with PBS; fluorescence in each well was measured with a Beckman DTS 880. The assay was performed in a 96-well black plate with CFSE-labeled C. albicans. Wells were coated with poly-D-lysine, 100 µg/100 μl PBS for 60 min at room temperature, then 200 units heparin in 50 µl RPMI-HEPES were added to each well. The plate was incubated overnight at room temperature. The following afternoon, pre-immune IgG and post-immune IgG were diluted in PBS to a final concentration of 13.2 µg/ml. 50 µl of pre- or post-immune IgG was deposited in the appropriate well for 30 min at room temperature, then  $1\times10^6$  CFSElabeled C. albicans in 50 µl RPMI-HEPES were added for two hours at room temperature. After this incubation, the wells were washed three times with PBS, and fluorescence was measured on the multimode detector as previously described.

Polyclonal IgG to the HKQEKQKKHQIHKV (SEQ ID NO: 4) motif in domain 3 of Int1 blocked 19% of binding of wild type *C. albicans* (WT) to heparin. FIG. 5 shows heparin binding of wild type *C. albicans* preincubated with pre-immune IgG (left closed circles) and wild type *C. albicans* pre-incubated with post-immune IgG raised to the polypeptide HKQEKQKKHQIHKV (SEQ ID NO: 4) (right closed circles), where data represent mean±SD of n=15 experiments performed in duplicate, \*p=0.023, by paired statistics. These results confirmed the importance of Motif 1, as a mediator of heparin binding in *C. albicans*.

In other systems, heparin has been reported to cleave surface proteins (56), change protein conformation (57), and bind trypsin-sensitive lysine and arginine residues in histone H1 (58). In order to understand whether incubation with heparin changed the conformation of C. albicans surface proteins,  $1\times10^7$  C. albicans were incubated for one hour at  $3^\circ$ C. on a rotator with pharmacologic heparin (20,000 units/ml) diluted in RPMI-HEPES to a working concentration of 250 units/ml. C. albicans  $1 \times 10^7$  C. albicans in an equal volume of RPMI-HEPES served as control. Supernatants were removed. 300 µl of Hep+ and Hep- supernatants were incubated with 100 µl avidin agarose beads (Thermo Scientific) for 60 min at room temperature on a rotator in the presence of 50 units heparin (Hep+); an equal volume of RPMI-HEPES was substituted for heparin in the Hep- supernatants. Beads were pelleted, and 100 μl beads were incubated with 100 μl 3.0 M NaCl for 30 mins at room temperature on a rotator. Beads were pelleted and the supernatants were withdrawn; 100 μl TCA was added to 100 μl Hep+ or 100 μl Hepsupernatants and incubated on ice overnight at 4° C. The TCA precipitates were stored at -80° C. until analysis by mass spectroscopy.

Six biological replicates of TCA precipitated protein pellets from equal cellular equivalence of heparin-treated (Hep+) and untreated (Hep-) conditioned medium from cultures of *C. albicans* were each solubilized in 50 µL Laemmli gel buffer. To remove any residual TCA and to further concentrate the samples, each was subjected to buffer exchange and concentration using an Amicon ultra 3 kDa microfuge filtration cartridge at 14,000×g for 15 min with five subse-

quent additions of  $50~\mu L$  of  $1\times$  Laemmli gel buffer between spins. The resulting retained proteins (6 Hep+ and 6 Hep-) were subsequently prepared for SDS-PAGE by combining into two pools of three samples for the Hep+ and Hep-conditioned medium. The replicate sample pools were loaded onto two 4-12% mini gels and separated using the MOPS buffer system followed by silver staining to visualize the proteins using the Sigma Proteosilver system. The proteins were prepared for identification and quantitation by mass spectrometry by gridding the gel lanes from the replicates of 10 Hep+ and Hep- samples into 11 equal regions followed by in gel trypsin digestion and extraction of peptides as described (59)

The recovered peptides from the gridded gel sections were analyzed by liquid chromatography coupled nano-electro- 15 spray mass spectrometry (nLC-MSMS) on a TripleTOF 5600 mass spectrometer (AB Sciex, Toronto Canada) attached to an Eksigent (Dublin Calif.) nanoLC ultra nanoflow system. Recovered peptides from each fraction were loaded on to IntegraFrit Trap Column (outer diameter of 360 um, inner 20 diameter of 100, and 25 µm packed bed) from New Objective, Inc. (Woburn Mass.) at  $2 \mu l/min$  in FA/H2O 0.4/99.2 (v/v) for 10 min to desalt and concentrate the samples. For the chromatographic separation of peptides, the trap-column was switched to align with the analytical column, Acclaim Pep- 25 Map100 (inner diameter of 75 μm, length of 15 cm, C18 particle sizes of 3 µm and pore sizes of 100 Å) from Dionex-Thermo Fisher Scientific (Sunnyvale Calif.). The peptides were eluted using a linear gradient from 95% phase A (FA/ H2O 0.4/99.6, v/v) to 40% phase B (FA/ACN 0.4/99.6, v/v) 30 from 5 min to 22.5 min (2% ACN/min) at a flow of 300 mL/min. As the peptides eluted from the column they were sprayed into the mass spectrometer using NANOSpray® III Source (AB Sciex, Toronto Canada). Ion source gas 1 (GS1), ion source gas 2 (GS2) and curtain gas (CUR) were respec- 35 tively kept at 7, 0 and 25 vendor specified arbitrary units. Interface heater temperature and ion spray voltage was kept at 150 C, and at 2.3 kV respectively. Mass spectrometer method was operated in positive ion mode set to go through 25 minutes, where each cycle performing one TOF-MS scan type 40 (0.25 sec accumulation time, in a 400 to 1600 m/z window) followed by twenty information dependent acquisition (IDA)-mode MS/MS-scans on the most intense candidate ions selected from initially performed TOF-MS scan during each cycle having a minimum 150 counts. Each product ion 45 scan was operated under vender specified high-sensitivity mode with an accumulation time of 0.05 sec and a mass tolerance of 50 mDa. Former MS/MS-analyzed candidate ions were excluded for 10 sec after its first occurrence, and data were recorded using Analyst®-TF (1.5.1) software.

NanoLC-MSMS data collected from the Hep+ and Hepsamples were converted to Mascot generic files and searched against the SwissProt fungal database on an in house server running Mascot version 2.2.07 (Matrix Science, Ltd). Specific search parameters included up to two missed tryptic 55 cleavages, carbamidomethylation of Cys, oxidation of Met, peptide and fragmentation mass tolerance of 0.1 Da. Only proteins with a minimum of two peptides with Mascot peptide score indicating a peptide identity and a false discovery rate (FDR) against and inverse database at less than 1% were 60 reported. Semi-quantitative measurements between the Hep+ and Hep- proteins were generated using a minimum of two tryptic peptides from each protein as surrogates for the amount of proteins from the two groups. This was accomplished by capturing extracted ion profiles for each peptide and then comparing the mono-isotopic peak intensity at the apex of the signal for the M+2H or M+3H signal for each

20

peptide. An average ratio of the maximal peak intensity between two independent peptides for each protein presented was used to determine semi-quantitative ratios of proteins between the Hep+ and Hep- samples.

To determine the levels of these proteins in control versus heparin-treated organisms, the relative level of several tryptic peptides were used as surrogates for the protein levels.

Compared to untreated organisms, heparin treatment led to a seven-fold increase in intensity of IDVVDQAK (SEQ ID NO: 65) from Eno1 (FIG. 6A), a ten-fold increase in intensity of SLLDAAVK (SEQ ID NO: 66) from Pgk1 (FIG. 6B), and a five-fold increase in VPTTDVSVVDLTVR (SEQ ID NO: 67) from Tdh3 (FIG. 6C) in supernatants.

Other peptides from Eno1, Pgk1, and Tdh3 also exhibited increased intensities, ranging from 10-16 fold the intensity of the corresponding peptides from untreated organisms (data not shown), further validating significant increases in the protein levels in the supernatants for heparin-treated cultures. Of the 12 proteins whose peptides were found in highest concentration in the supernatant (Table 4), all but one are known to be localized to the cell wall; cellular localization of Eft1 is not known. Eight of the twelve, including Eno1, Pgk1, Tdh3 and Ssa1/2, themselves contain putative heparin binding motifs (Table 1) and are considered critical antigens for innate and adaptive immune responses against *C. albicans* (31-36).

TABLE 4

ID	Prot Score	Prot Mass	Peptide Matches**
Eno1*,#	2877	47202	213
Ssa2*,#	1938	70199	73
Pgk1*,#	1826	45266	131
Tdh3*,#	1751	35508	192
$Hsp90^{\#}$	1666	80773	65
Ssb1*,#	1608	66562	82
Met6#	1566	85763	70
Ssa1*,#	1455	70452	61
$\mathrm{Adh1}^{\#}$	1218	37255	67
Eft1	1187	50426	99
Ino1*,#	1006	57857	39
Eft2*,#	933	93865	25

\*proteins with putative linear heparin binding motifs;

In order to evaluate the consequences of removal of Ssa1 and Ssa2 (Table 4), both targets of histatin, a histatin killing assay was performed as follows. C. albicans strains were grown to late log phase overnight in YPD. A single colony was suspended in 1 ml YPD, diluted 1:500 into 10 ml YPD, and incubated overnight at  $30^{\circ}$  C. and 225 rpm to  $OD_{600}$  1.0. Yeast cells were washed twice in PBS and 2×10<sup>4</sup> cells suspended in 250 µl RPMI+10 mM HEPES, pH 7.0, with or without 500 units/ml heparin (Sigma). The cells were incubated at 37° C. for one hour with shaking, washed twice with 10 mM phosphate buffer, pH 7.4, and suspended in 20 μl phosphate buffer. Histatin 5 (final concentration 15 µM; Peptides International) or 10 mM phosphate buffer was added to the preincubated cells (total volume 40 µl) and incubated further at 37° C. for 90 minutes with shaking. YPD (360 ul) was added to each tube, a 40  $\mu l$  aliquot spread onto YPD plates, and colonies counted after two days. The effect of heparin treatment was determined by the formula % change= [(cfu+heparin)-(cfu-heparin)]/(cfu+heparin).

Heparin binding to trypsin-sensitive lysine and arginine residues in histone H1 unfolds chromatin and increases its accessibility (58). To test whether heparin binding could influence gene expression in *C. albicans*, qRT-PCR was per-

<sup>\*\*</sup>total peptides identified by MSMS including duplicates; and

<sup>#</sup>cell wall proteins by Gene Ontology

22
TABLE 5 -continued

formed on a selective set of 13 genes involved in adhesion, cell-cell interaction, and biofilm formation after incubating C. albicans with and without 100 units/ml heparin at 37° C. for 75 minutes. Gene expression studies were performed as follows. Overnight cultures (3 ml YPD at 30° C., 225 rpm) 5 were diluted in 25 ml YPD to a nominal concentration of  $8\times10^5$ /ml and grown to OD<sub>600</sub> approximately 1.0 (30° C., 225 rpm), collected by centrifugation, and washed in PBS. Cells  $(5\times10^7)$  were suspended in 5 ml RPMI1640 with 25 mM MOPS pH7.4, with or without 100 units/ml Sigma heparin in 10 50 ml polypropylene tubes, and incubated at 37° C. with shaking for 75 minutes. One ml aliquots (approximately  $10^7$ cells) were collected by centrifugation, washed once with room temperature PBS, and frozen at -80°. Pellets were thawed on ice and suspended in 1 ml Tri-Reagent (MRC Research) in a 2 ml screw capped tube containing about 0.2 g acid washed glass beads (Sigma) and vortexed three times for 1 minute with a 1 minute rest on ice between each vortex. The lysates were rested for five min at room temperature, centrifuged for five min at 12,000 rpm, and RNA isolated from the 20supernatant using the DirectZol kit (Zymo), including DNAse digestion, per manufacturer's instructions. cDNA was produced from equivalent quantities of RNA (between 300 and 900 ng) for each treatment using the Maxima Reverse Transcriptase Kit for qRT-PCR (Fermentas). Two  $\mu l$  of 1:5  $^{25}$ dilution of cDNA was used in each qPCR reaction with 500 nM of each primer and Fast SYBR Green Master Mix (Life Technologies) on a 7500 FAST Instrument (Applied Biosystems) according to manufacturer's instructions. Relative expression was determined using the  $\Delta\Delta Ct$  method (60) with  $^{-30}$ 18S RNA as the reference. Primers are shown in Table 5.

TABLE 5

_			
	Primer	Sequence	SEQ ID NO:
	18S F	TCTTGTGAAACTCCGTCGTG	68
	18S R	AGGGACGTAATCAACGCAAG	69
	AHP1 F	TGTGCCTGGTGCTTTTACC	70
	AHP1 R	TTAGCCCAAGCTGCCATTAC	71
	ALS1 F	TCATTTGCCACCACTACCAC	72
	ALS1 R	TGGCATAGGATTGTGACCAG	73
	ALS3b F	GCTGGTGGTTATTGGCAACGTGC	74
	ALS3b R	TGGTAAGGTGGTCACGGCGG	75
	CDC10 F	AGATCAAGGGCAAACCTCAC	76
	CDC10 R	ATAGGAGCATTTGGCACACC	77
	EAP1 F	TACCCAGGCCAATACAAAGG	78
	EAP1 R	TAATGGGCTTGACCTTGGAG	79
	ECE1 F	CTAATGCCGTCGTCAGATTG	80
	ECE1 R	AACATCTGGAACGCCATCTC	81
	ENO1 F	CCATTGACAAAGCCGGTTAC	82
	ENO1 R	TTAGATGGGTCGGATTCTGG	83
	HGC1 F	AGGTCGCAAGCAACAAC	84
	HGC1 R	AAGAAACAGCACGAGAACCAG	85
	HWP1b F	TCCTGCCACTGAACCTTCCCCAG	86

Primer	Sequence	SEQ ID NO:
HWP1b R	CCACTTGAGCCAGCTGGAGCG	87
HWP2 F	CCACCAAAACCAAGTGCTAC	88
HWP2 R	AACTCCAGATGATCCCGAAG	89
INT1 F	TGTGCCCACTGAAGTCAAAG	90
INT1 R	GCTTTACCGGTGATTTGGTC	91
RBT1 F	CACCTCATGCTCCAACAATG	92
RBT1 R	GATGATTCTGGGGCTGATTC	93
RBT5 F	TGCTGAAAGTTCTGCACCAG	94
RBT5 R	GCTTCAACGGAAACAGAAGC	95

FIG. 7A shows CFU of *C. albicans* WT and DD after 75-minute incubation without (left bar of each set) or with (right bar of each set) 500 units/ml heparin followed by histatin 5 (15  $\mu$ M), performed in duplicate. Confirming proteomic results showing removal of Ssa1/2 (Table 3), incubation of wild type *C. albicans* with 500 units/ml heparin led to a 25% decrease in histatin-mediated killing (FIG. 7A); in contrast, heparin treatment of the INT1 double disruptant did not impair killing (1.5% decrease).

FIG. 7B shows relative mRNA expression of thirteen genes measured by qRT-PCR after incubation of *C. albicans* with heparin, with the level of expression compared to *C. albicans* without heparin (=1). Results showed a 2.5 to 3-fold increase in mRNA for HWP1 and HWP2.

In order to understand whether heparin binding motifs 1 and 4 influenced *C. albicans* pathogenesis in vivo, we employed a rat model of biofilm formation in central venous catheters inserted into the jugular vein, as previously described (61). After insertion into the jugular vein of an anesthetized female Sprague-Dawley rat, a silastic catheter was heparinized with 100 units heparin/mil and remained in place for 24 hours. At the 24 hour timepoint, 500 μl of blood was withdrawn and cultures to insure sterility, and then 1×10<sup>6</sup> CFU of the desired *C. albicans* strain was instilled into the catheter and allowed to dwell for 6 hours. The animal was then sacrificed, the catheter was removed aseptically and processed for scanning electron microscopy. Biofilm formation on the intra-luminal surface of the catheter was assessed by scanning electron microscopy (SEM) at 100× and 2000×.

FIGS. **8**A-F demonstrated that heparin binding motifs contribute to biofilm formation in vivo.

The INT1 wild type strain (WT) produced a profuse biofilm with intertwined hyphae and visible exopolysaccharide
matrix (FIG. 8A). Biofilm formation by the Int1 double disruptant was much reduced on SEM (FIG. 8B), as expected.

55 Reintegration of one wild type copy of INT1 restored a profuse biofilm (FIG. 8C). However, alanine substitution of
lysines<sub>805/806</sub> in Motif 1 greatly impaired biofilm formation
(FIG. 8D). Although alanine substitution of lysine<sub>1595</sub> and
arginine<sub>1596</sub> in Motif 4 did not reduce biofilm formation (FIG.

60 8E), the Motif 1&4 mutant again produced sparse biofilm
(FIG. 8F). These results showed that lysine residues 805/806
in Motif 1 were critical for biofilm formation in vivo.

Inhibition of biofilm formation by the antibody raised against the peptide sequence HKQEKQKKHQIHKV (SEQ ID NO:4) was also tested in the rat central venous catheter model. A 1:10 dilution of affinity-purified IgG against the peptide HKQEKQKKHQIHKV (SEQ ID NO: 4) was incu-

bated with wild type C. albicans at 30° C. for one hour. A 1:10 dilution of pre-immune IgG was used as a control. The strains were then instilled into separate jugular venous catheters in individual rats. After 6 hours, catheters were removed and aseptically processed for scanning electron microscopy 5 (100× and 2000×) as described above.

Central venous catheters from animals that received *C. albicans* pre-incubated with IgG against HKQEKQKKHQI-HKV (SEQ ID NO:4) exhibited substantially reduced biofilm formation. FIG. **9** (left panel) shows intraluminal biofilm 10 (100× and 2000×) from *C. albicans* incubated with pre-immune IgG; there is no diminution in biofilm, hyphae, or production of exopolysaccharide matrix. FIG. **9** (right panel) shows intraluminal biofilm (100× and 2000×) from *C. albicans* incubated with post-immune IgG recognizing the 15 sequence HKQEKQKKHQIHKV (SEQ ID NO: 4); there is a marked diminution in biofilm with sparse hyphae and no matrix

In vitro study results showed that *C. albicans* binds heparin through HBM in Int1 (FIG. 4C). The specificity of this interaction was confirmed by inhibition with heparin (data not shown) and with antibodies directed against a peptide that encompasses Motif 1 in Int1 (FIG. 5). Binding of heparin results in several consequences that could potentially impact virulence in vivo: removal of *Candida* surface proteins that 25 serve as targets for innate (FIG. 7A) and adaptive (FIG. 6A-C) immune defenses and modulation of gene expression (FIG. 7B)

The in vivo studies of biofilm formation in heparinized central venous catheters in rats showed an obvious reduction 30 in biofilm formation after mutation of lysine residues 805/806 in Motif 1 (FIGS. 8D, 8F). In addition, a rabbit IgG antibody directed against a peptide encompassing Motif 1 dramatically inhibited biofilm formation in the rat central venous catheter model as well (FIG. 9, right panel). These results not only 35 demonstrate the central role of lysine residues in Motif 1 but also have important clinical implications because of the use of heparin in central venous catheters, in which setting *Candida* spp. are the fourth most common cause of infections (23, 24).

Putative linear HBM are also present in *Staphylococcus* 40 epidermidis and *Staphylococcus aureus* (Long and Hostetter unpublished data), two organisms that are even more common causes of catheter-associated infection (43), as shown in Tables I-IV. For example, putative linear HBM were identi-

24

fied in the following cell wall or putative cell wall proteins, where the motif and the beginning position of the motif is indicated in parenthesis, from methicillin resistant Staphylococcus aureus, strain 252 (MRSA252): sasC (LKKNKY; 4; and IRKYKV; 11), isdB (YKKAKT; 289), sasF (SRRNKL; 618), glcB (IRKFKL; 415), sasA (MHHTHS; 1263), SAR0879 (LKKIKG; 573), SAR0986 (YRHLKP; 754), SAR1559 (IRKAHQ; 206), SAR2393 (PKRKVVKI; 149), and sasG (VRKARS; 140); from methicillin sensitive Staphylococcus aureus, strain 476 (MSSA476): SAS2383 (VRKARS; 140; and VKKSKI; 1319), SAS1682 (LKKNKY; 4; and IRKYKV; 11), SAS1063 (YKKAKT; 282), SAS1657 (YHKAKT; 484), SAS2532 (SRRNKL; 626), SAS2540 (MHHTHS; 2187), SAS0082 (LKKIKG; 573), SAS1011 (IRKAHQ; 206), SAS2035 (PKRKVVKI; 149), and SAS2424 (IRKFKL; 415); and from Staphylococcus epidermidis, strain RP62A: SERP1316 (FRKQKF; 4; VHRLKV; 352; and IHKIKP; 3234), SERP0660 (LKKWKV; 4; and IRRAHQ; 212), SERP0719 (TRKNHY; 13), SERP1482 (VKRFKN: 1730), SERP1654 (MKKSKV: 1), SERP2264 (MKRIKT; 393), SERP0207 (NRKNKN; 887), and SERP1691 (PKKIKN; 72).

In one embodiment, an antibody is generated against a linear heparin binding motif which is conserved among MSSA, MRSA, and *S. epidermidis*. In one embodiment, the conserved heparin binding motif is selected from the group consisting of LKKNKY, LKKNKY, LKKWKV, LKKIKG, LKKIKG, VRKARS, VRKARS, YKKAKT, YKKAKT, YHKAKT, PKRKVVKI, PKRKVVKI, IRKAHQ, IRKAHQ, and IRRAHQ.

Putative linear HBM were identified in the following cell wall or putative cell wall proteins from various yeast species, as shown in Table V where a check mark indicates that the motif is identical to the motif found in *C. albicans*, including *C. dubliniensis* (Int1 (YKKRFFKL), Eno1 (AKKGKF), and Tdh3 (GHKIKV) proteins), *C. parapsilosis* (Tdh3 protein (GHKIKV)), *C. tropicalis* (Int1 (FKRRFFKL), and Tdh3 (GHKIKV) proteins), *C. glabrata* (Int1 (FKKRFFTL) protein), *Lodderomyces elongisporus* (Int1 (FKKFIFKL) and Tdh3 (GHKIKV) proteins), and *A. nidulans* (Int1 (FKKRFFKL) protein). In embodiments, an antibody directed to a region of these proteins containing the putative HBM or the region of these proteins containing the putative HBM may be used in the described methods.

TABLE I

Methicillin resistant <i>Staphylococcus</i> aureus, strain 252 MRSA252								
GI Accession	Name	Description	"Cell wall" in Description	"Cell wall" in GO annotation	Have signaling peptide	Motif in Se- quence	Motif	Start Loca- tion
G1:49484003	sasC	putative surface anchored protein			Yes	Yes	LPNTG	2153
GI:49483291	isdB	iron-regulated heme-iron binding protein			Yes	Yes	LPQTG	616
GI:49484843	sasF	putative surface anchored protein			Yes	Yes	LPKAG	588
GI:49484739	glcB	PTS system, glucose- specific IIABC component				Yes	LPAAG	22
G1:49484850	sasA	putative serine rich repeat containing protein				Yes	LPDTG	1308
GI:49482351	SAR0879	putative myosin- crossreactive antiqen				Yes	LPKAG	57
GI:49482500	SAR0986	putative nitric oxide reductase				Yes	LPSAG	230

TARLE	т	-continued

		TABLE	1 -001101111	<u> </u>		
		Methicillin resistant :	Staphylococcus MRSA252	s aureus, str	ain 252	
GI:49483239	SAR1559	putative cobalt transport protein			Ye	s LPITG 258
GI:49484356	SAR2393 sasG	hypothetical protein virulence associated cell wall protein			Υe	s LPTAG 177
GI Accession	Ortholog in MSSA476	MSSA476 ortholog	Ortholog in RP62A	RP62A orthology has motif:	Have heparin binding motif?	#of heparin binding motifs
GI:49484003 GI:49483291	SAS1682 SAS1063		SERP1316	Yes	Yes Yes	2 1
GI:49483291 GI:49484843 GI:49484739	SAS2532 SAS2424	Yes	SERP2264	Yes	Yes Yes	1 1
GI:49484850 GI:49482351 GI:49482500	SAS2540 SAS0082	Yes	GI:57865710 GI:57866574	No No	Yes Yes Yes	1 1 1
GI:49483239 GI:49484356	SAS1011 SAS2035		SERP0660 SERP1739	Yes Yes	Yes Yes Yes	1 1 1
GI Accession	Motif 1 type	Motif 1 seq	Motif after	Motif 2 type	Motif 2 seq	Motif lifter
GI:49484003	Cardin	LKKNKY	3	Cardin	IRKYKV	10
GI:49483291	Cardin	YKKAKT	288			
GI:49484843	Cardin	SRRNKL	617			
GI:49484739	Cardin	IRKFKL	414			
GI:49484850	Cardin	MHHTHS	1262			
GI:49482351	Cardin	LKKIKG	572			
GI:49482500	Cardin	YRHLKP	753			
GI:49483239	Cardin	IRKAHQ	205			
GI:49484356		o PKRKVVKI VRKARS	148 139	found by MKH		

TABLE II

Methicillin sensitiveie Staphylococcus aureus, strain 476

ID MSSA476	refSeq	GI Accession	Name	Description	"Cell wall" in Description	"Cell wall" in GO annotation
SAS2383	YP_044496.3	1 GI : 49487275	SAS2383	putative cell wall-	Yes	Yes
SAS1682	YP_043802.	1 GI : 49486581	SAS1682	anchored protein putative surface anchored protein		
SAS1063	YP_043187.3	1 GI : 49485966	SAS1063	_		Yes
SAS1657	YP_043776.3	1 GI : 49486555	SAS1657	3 1		Yes
SAS2532	YP_044646.3	1 GI : 49487425	SAS2532	-		
SAS2540	YP_044654.	1 GI : 49487433	SAS2540	putative cell wall- anchored protein	Yes	Yes
SAS0082	YP_042206.3	1 GI : 49484985	SAS0082	putative myosin- crossreactive antiqen		
SAS1011	YP_043135.	1 GI : 49485914	SAS1011	putative cobalt transport protein		
SAS2035	YP 044146.3	1 GI : 49486925	SAS2035	hypothetical protein		
SAS2424	YP_044538.	1 GI : 49487317	SAS2424	PTS system, glucose- specific IIABC component		

TABLE II -continued

INDEL 11 CONCINCC															
	Methicillin sensitiveie <i>Staphylococcus</i> aureus, strain 476 MSSA476														
ID MSSA476	Have signaling peptide	Motif in Sequence	Motif	Start Loca- tion	Orthlog in MRSA252	MRSA252 ortholog has motif?	Ortholog in RP62A	RP62A orthology has motif?	Have heparin binding motif?						
SAS2383 SAS1682 SAS1063 SAS1657 SAS2532 SAS2540 SAS0082 SAS1011 SAS2035 SAS2424	Yes Yes Yes Yes Yes	Yes	LPKTG LPNTG LPQTG LPKTG LPKAG LPDTG LPKAG LPITG LPITG LPTAG LPTAG LPTAG	1338 2150 609 860 596 2232 57 258 177 22	sasG sasC isdB sasF sasA SAR0879 SAR1559 SAR2393 glcB	Yes Yes Yes Yes Yes Yes Yes	aap SERP1316 SERP2264 GI:57865710 GI:57866574 SERP0660 SERP1739	Yes Yes Yes No No Yes Yes	Yes Yes Yes Yes Yes Yes Yes Yes Yes						
ID MSSA476	# of heparin binding motifs	Motif 1 type	Motif 1		Motif after	Motif 2 type	Motif 2 se	eq Mot	if after						
SAS2383	2	Cardin	VRKARS		139	Cardin	VKKSKI		1318						
SAS1682	2	Cardin	LKKNKY		3	Cardin	IRKYKV		10						
SAS1063	1	Cardin	YKKAKT		281										
SAS1657	1	Cardin	YHKAKT		483										
SAS2532	1	Cardin	SRRNKL		625										
SAS2540	1	Cardin	MHHTHS		2186										
SAS0082	1	Cardin	LKKIKG		572										
SAS1011	1	Cardin	IRKAHQ		205										
SAS2035	1	Wentraub	PKRKVVKI		148										
SAS2424	1	Cardin	IRKFKL		414										

TABLE III

			St	aphyloc	coccus	epidern	nidis,	strain RP6	52A		
ID RP62A	refSeq		GI Accession	Nam	e	Descri	ption			l wall" in ription	"Cell wall" in GO annotation
SERP1316	YP_1888	88.1	GI:57867198	SER	P1316	cell w				Yes	
SERP0660	YP_1882	45.1	GI:57866567	SER	P0660	cobalt	tramil trans prote				
SERP0719	YP_1883	02.1	GI:57866639	rface y protein	Yes						
SERP1482	YP_1890	48.1	GI:57867352	rface y protein		Yes					
SERP1654	YP_1892	19.1	GI:57867536	SER	P1654	cell w	all su				
SERP2264	YP_1898	15.1	GI:57865679	SER	P2264	cell w	all su	2 1		Yes	
SERP0207 SERP1691			GI:57866125 GI:57867615		P0207 P1691	sdrG p	rotein livisio				
				St:	rain RF	P62A (c	ontinu	ation)			
ID RP62A	Have sig- naling peptide	Motif in Se- quence		Start Loca- tion	Orthl in MSSA4	log oi	SSA476 rtholog has motif?	gOrtholog in MRSA252	MRSA252 orthology has motif?	Have heparin binding motif?	g binding
SERP1316 SERP0660									Yes Yes	Yes Yes	3 2

TABLE III -continued

SERP0719	Yes	Yes LPE	rg 787					Yes	1
SERP1482	Yes	Yes LPD'	rg 1937					Yes	1
SERP1654	Yes	Yes LPE	IG 165					Yes	1
SERP2264	Yes	Yes LPA'	IG 639	SAS2532	Yes	sasF	Yes	Yes	1
SERP0207		Yes LPD'	IG 852	SAS0521	Yes	bbp	Yes	Yes	1
SERP1691		Yes LPI'	IG 352	SAS1988	Yes	SAR2371	Yes	Yes	1
			S	train RP62A	(continu	ation)			
	Motif	Motif	Motif	Motif	Motif	Motif	Motif	Motif	Motif
ID RP62A	1 type	1 seq	after	2 type	2 seq	after	3 type	3 seq	afteı
SERP1316	Cardin	FRKQKF	3	Cardin	VHRLKV	351	Cardin	IHKIKP	3233
SERP0660	Cardin	LKKWKV	3	Cardin	IRRAHQ	211			
SERP0719	Cardin	TRKNHY	12						
SERP1482	Cardin	VKRFKN	1729						
SERP1654	Cardin	MKKSKV	0						
SERP2264	Cardin	MKRIKT	392						
SERP0207	Cardin	NRKNKN	886						
SERP1691	Cardin	PKKIKN	71						

TABLE IV

Linear	Heparin	Binding	Motifs	Conserv	ed Amon	g 2 or	3 Staphy.	lococcu	s specie:	s	
MRSA MSSA St. epi	sasC sasC serp0660	LKKNYY	sar0879 sas0082			VRKARS VRKARS		YKKAKT YKKAKT	sas1657	үнкакт	sar2892 sas2035
				1	MRSA MSSA St. epi		PKRKVVKI PKRKVVKI		sari 559 sas1011 serp0660		IRKAHQ IRKAHQ IRKAHQ

TABLE V

Heparin Binding Motifs in various yeast species												
HEPARIN-BIN C. albicans XX		C. albicans	C. dubliniensis	C. parapsilosis	C. tropicalis	C. glabrata	Lodderomyces elongisporus	A. nidulans				
Motif	Protein	_										
FKKRFFKL LRRLRT	Int1 Ssa2/Ssb1	√ √	YKKRFFKL	по	FKRRFFKL	FKKRFFTL	FKKFIFKL no	$\checkmark$				
AKKGKF GHKIKV	Eno1 Tdh3	√ √	<b>√</b> ✓	no √	no √		no √					

√ identical

The interaction of *C. albicans* with heparin or heparin-like compounds may play a key role in clinical settings where 50 heparin is used (e.g. central venous catheters, dialysis catheters) or possibly in tissues where heparan sulfates are preferentially expressed.

Because antibodies raised against a linear heparin binding motif inhibited binding of *C. albicans* to heparin, the heparin 55 binding peptide HKQEKQKKHQIHKV (SEQ ID NO: 4) could be used as an immunizing antigen in immunocompetent patients to elicit antibodies that protect against heparin binding.

For example, a peptide from streptococcal M protein has 60 been used to make a vaccine for rheumatic fever (62). Alternatively, antibodies raised against this peptide in immunized humans can be used for passive immunization. This technology is used with commercially available antibodies such as hepatitis B immune globulin (HBIG) or botulism immune 65 globulin (BabyBIG®) (63). Hepatitis B immune globulin is commercially available; botulism immune globulin is made

and distributed by the California Department of Public Health and is FDA-approved. A humanized monoclonal antibody recognizing a desired heparin binding motif could be made using technology for the production of palivizumab (Synagis®), a humanized monoclonal antibody that is given monthly to premature newborns to prevent infection with respiratory syncytial virus (64). Because similar heparin binding motifs are also found in *S. epidermidis* and *S. aureus*, using heparin binding motifs as antigens is a first step in developing vaccines against three of the most common causes of central line-associated bloodstream infection.

Antibodies raised against a linear heparin binding motif expressed by a surface protein of *C. albicans* inhibited adhesion of the yeast to heparin in vitro and abolished biofilm formation in vivo. Similar heparin binding motifs occur in surface proteins from *S. epidermidis* and *S. aureus*, two organisms which are also major causes of biofilm-related infections.

In one embodiment, an antibody reactive with a heparin binding motif expressed on the surface of a microorganism is

administered to an individual. The microorganism may be, but is not limited to, a Candida species or a Staphylococcus species. In one embodiment, the microorganism is C. albicans, S. epidermidis and/or S. aureus. In one embodiment, the heparin binding motif is identified by a computer-based algo- 5 rithm analysis of protein sequences expressed by a microorganism. In one embodiment, the heparin binding motif to which the antibody was generated is derived from Int1. In one embodiment, the antibody is directed to the peptide HKQEKQKKHQIHKV (SEQ ID NO: 4), or a fragment of 10 this peptide. In one embodiment, the fragment is at least seven amino acids of the peptide. In one embodiment, the surface expression of the heparin binding motif depends on the lifecycle stage of the microorganism. In one embodiment, the antibody is a polyclonal antibody. In one embodiment, the 15 antibody is a monoclonal antibody.

In one embodiment, a peptide that corresponds to a linear heparin binding motif expressed on the surface of a microorganism, or a portion of the peptide, is provided. In one embodiment, the peptide is used to generate antibodies 20 directed against the peptide, using methods known in the art. Alternatively, a peptide is provided combined with additional carriers or as a component of a complex, e.g., an adjuvant non-toxic to humans. Such an adjuvant could be aluminum hydroxide used in Engerix-B® (commercially available 25 hepatitis B vaccine), and in Comvax® (commercially available vaccine for Haemophilus influenzae type b and hepatitis B). The peptide corresponds to a linear heparin binding motif, or a portion of the motif, of a microorganism. In one embodiment, the microorganism is a Candida species and/or a Sta-30 phylococcus species. In one embodiment, the microorganism is C. albicans, S. epidermidis and/or S. aureus. In one embodiment, the heparin binding motif is identified by a computer-based algorithm analysis of protein sequences expressed by a microorganism. In one embodiment, the heparin binding motif is derived from Int1. In one embodiment, the peptide is HKQEKQKKHQIHKV (SEQ ID NO: 4), or a fragment of SEQ ID NO: 4. In one embodiment, the peptide is a fragment of the peptide HKQEKQKKHQIHKV (SEQ ID NO: 4), where the fragment contains at least seven amino 40 acids of the peptide. In one embodiment, the surface expression of the heparin binding motif depends on the life-cycle stage of the microorganism. In one embodiment, the peptide is used to generate an antibody using methods known in the

In one embodiment, a method is provided for ameliorating biofilm formation on a surface of an implanted device in a patient. In one embodiment, the method comprises administering an antibody to a patient, and ameliorating biofilm formation on a surface of an implanted device in a patient, 50 wherein the antibody is directed to a heparin binding motif expressed on the surface of a microorganism. In one embodiment, the antibody is administered intravenously at a dose not more than 2 grams/kg given as an infusion over 10-24 hours. Since the half-life of antibody preparations is about four 55 weeks, antibody administration would be repeated at monthly intervals over the life of the catheter. In one embodiment, the antibody has been modified to increase safety and/or efficacy in a human patient. In one embodiment, the antibody has been humanized using methods known in the art. In one embodi- 60 ment, the described antibody is provided as a pharmaceutical composition with at least one biocompatible excipient, e.g., buffers, preservatives, tonicity adjusting agents, pH adjusting agents, osmolality adjusting agents, etc, as known to one skilled in the art. Without being held to a single theory, the 65 antibody blocks binding between a heparin binding motifcontaining protein expressed on the surface of a microorgan32

ism and heparin or heparin sulfate, which is expressed by human cells lining the lumen of the implanted device (FIG. 10). Binding of the antibody to the microorganism prevented its attachment to heparin or to heparin sulfate moieties. In the rat model of *Candida* infection of central venous catheters, the disclosed antibody recognizing a peptide encompassing Motif 1 in *Candida albicans* Int1 (also called anti-KKHQ antibody ("KKHQ" disclosed as SEQ ID NO: 6)) showed excellent in vivo results. The antibody recognizing Motif 1 (anti-KKHQ antibody ("KKHQ" disclosed as SEQ ID NO: 6)) substantially inhibited biofilm production, as shown in FIG. 9. FIGS. 11 and 12A-C demonstrate the anti-KKHQ antibody is effective against various *Candida* species.

The administration of the described antibody is referred to as passive immunization.

In one embodiment, the method comprises administering a peptide to a patient, where the peptide encompasses a heparin binding motif, or a fragment of the motif, that is expressed on the surface of a microorganism. The peptide is 14 amino acids in length, with amino acids both preceding and following the 8 amino acids of the heparin binding motif. In one embodiment, the peptide is HKQEKQKKHQIHKV (SEQ ID NO: 4), or a fragment thereof. In one embodiment, the described peptide is provided as a pharmaceutical composition comprising at least one biocompatible excipient including but not limited to buffers, stabilizing agents, solubility enhancing agents, tonicity agents, etc. as known to one skilled in the art.

Without being held to a single theory, the peptide serves as an antigen to immunize the patient. It provides immunity by promoting endogenous generation of antibodies directed to the peptide, where the endogenously-produced antibodies block binding between heparin, which is administered through the catheter or is bound to a surface of an implanted medical device, and a heparin binding motif-containing protein expressed on a microorganism surface. Administration of the described peptide is referred to as active immunization. Peptide vaccines are typically administered subcutaneously or intramuscularly. Immunizing dose of the peptide and frequency of immunization are experimentally determined with humans.

The patient being treated may be naturally immunodeficient by having an underdeveloped immune response, e.g., a premature newborn. The patient being treated may have a normal immune response, but may be immunocompromised due to particular circumstances, e.g., as a result of treatment such as chemotherapy, or disease, or burns. In one embodiment, the disclosed antibody is administered to an immunodeficient patient. In one embodiment, the disclosed peptide is administered to an non-immunodeficient patient, e.g., an otherwise well adult or child who will receive long term antibiotics through a central line for the treatment of a serious infection, e.g., endocarditis.

In one embodiment, the implanted medical device, e.g., catheter, central line, hemodialysis catheter, peritoneal catheter, PICC line, plastic catheters such as central venous catheters, urinary tract catheters, central nervous system shunt catheters, peritoneal dialysis catheters, dialysis shunts, etc., is implanted in a vein, artery, or a body cavity. In one embodiment, the implanted medical device is a plastic device. In one embodiment, the implanted device is present in the patient's body for a period of time ranging from minutes to six weeks or longer. In one embodiment, the above described methods may be performed before the device is implanted in the patient. In one embodiment, a first dose of the antibody is administered before the medical device is implanted. In this

embodiment, a peripheral intravenous line could administer this first dose of the antibody if the device to be implanted is a catheter.

In one embodiment, the described methods decrease the virulence of a microorganism, i.e., the method decrease the ability of a microorganism to cause infection in a patient.

All references cited are expressly incorporated by reference herein in their entirety.

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34

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38

cell line stability, process validation, and scale-up for manufacturing. Biologicals. 1999; 27(3):203-15.

The instant application contains a Sequence Listing which has been submitted in ASCII format via EFS-Web and is hereby incorporated by reference in its entirety. The ASCII copy, created on Mar. 8, 2013, is named 070248\_94\_SL.txt and is 30,824 bytes in size.

The embodiments described in the specification are only specific embodiments of the inventors who are skilled in the art and are not limiting. Therefore, various changes, modifications, or alterations to those embodiments may be made without departing from the spirit of the invention or the scope of the following claims.

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Glu 465	Asn	Phe	Ile	Asp	Ala 470	Lys	Ser	Thr	Asn	Thr 475	Asn	ГЛа	Gly	Gln	Leu 480
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Ile	Arg 930	Asn	Ala	Arg	Arg	Leu 935	Ser	Ala	a As	n L	_	Ala 940	Ala	Pro	) Asr	n Gln
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Leu	Val 1040	_	Glr	ı Lys	Pro	Lys 104		ys A	Asn	Ser	Ile		al 050	Thr	Asp	Pro
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Thr	Asp 1085		: Le	ı Pro	y Tyr	Let 109		er A	/ap	Glu	Leu		/s )95	Lys	Pro	Pro
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Pro	Thr 1475	Glu	Val	ГÀв	Asp	Thr 1480		Ala	Asn	ГÀа	Phe 1485	Ala	Pro	Asp
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Lys	Ile 1655	Lys	Phe	Ala	Asn	Gly 1660	Glu	Leu	Ile	Asp	Phe 1665	СЛа	Ala	Pro
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tcttgtgaaa ctccgtcgtg
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<212> TYPE: DNA
<213 > ORGANISM: Artificial Sequence
<220> FEATURE:
<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
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agggacgtaa tcaacgcaag
<210> SEQ ID NO 70
<211> LENGTH: 19
<212> TYPE: DNA
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<220> FEATURE:
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tgtgcctggt gcttttacc
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<211> LENGTH: 20
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ttagcccaag ctgccattac
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<220> FEATURE:
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tcatttgcca ccactaccac
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<220> FEATURE:
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tggcatagga ttgtgaccag
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<211> LENGTH: 23
<212> TYPE: DNA
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<220> FEATURE:
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gctggtggtt attggcaacg tgc
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<212> TYPE: DNA
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      primer
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tggtaaggtg gtcacggcgg
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agatcaaggg caaacctcac
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      primer
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ataggagcat ttggcacacc
                                                                       20
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<211> LENGTH: 20
<212> TYPE: DNA
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<223> OTHER INFORMATION: Description of Artificial Sequence: Synthetic
      primer
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      primer
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<220> FEATURE:
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      primer
<400> SEQUENCE: 80
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aacatetgga acgecatete
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ccattgacaa agccggttac
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ttagatgggt cggattctgg
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aggtcgcaag caacaacaac
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<220> FEATURE:
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aagaaacagc acgagaacca g
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<212> TYPE: DNA
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<220> FEATURE:
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      primer
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tcctgccact gaaccttccc cag
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ccacttgage cagetggage g
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tgtgcccact gaagtcaaag
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gctttaccgg tgatttggtc
                                                                        2.0
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40

What is claimed is:

gcttcaacgg aaacagaagc

- 1. A composition comprising at least one biocompatible excipient and an antibody capable of binding to peptide HKQEKQKKHQIHKV (SEQ ID NO: 4) wherein the excipient comprises a Tris buffer and wherein the antibody is a 45 non-human humanized antibody.
- 2. The composition of claim 1, where the peptide HKQEKQKKHQIHKV (SEQ ID NO: 4) is a portion of a protein.
- **3**. The composition of claim **2** where the microorganism is 50 a *Candida* species or a *Staphylococcus* species.
- **4.** The composition of claim **1** where the peptide is derived from Int1 protein (SEQ ID NO: 5).
- **5**. The composition of claim **1** where the antibody is a polyclonal antibody.

- **6**. The composition of claim **1** where the antibody is a monoclonal antibody.
  - 7. A kit comprising

20

- instructions for administering a composition to a patient candidate for medical device installation or implantation, and
- a composition comprising at least one biocompatible excipient and an antibody capable of binding to peptide HKQEKQKKHQIHKV (SEQ ID NO: 4)
- where the excipient comprises a Tris buffer and wherein the antibody is a non-human humanized antibody.
- **8**. An antibody capable of binding to peptide HKQEKQKKHQIHKV (SEQ ID NO: 4) where the antibody is a nonhuman humanized antibody.

\* \* \* \* \*